Fill in this information to identify your case:	
United States Bankruptcy Court for the: Eastern District of Wisconsin	
Case number (If known):  Chapter you are filing to the control of the chapter of	under:

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **identify Yourself** 

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		,
:	Write the name that is on your government-issued picture	Shanika	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	Saulsberry	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	in vallet in vallet verste flag flagte in der verste flagten och å ententionalekternomen ellerföretigt och nombet kommensen av pave	н тапанатап не пот на пот на на завишение и по и население, е и по по на завишение се се за высователната се выполнения да выселения на высователните на поставителните на поставителнителните на поставителните на поставите на пост
	years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
:		Last name	Last name
incresse.	en e	definition of the confidence o	
	Only the last 4 digits of your Social Security	xxx - xx - <u>7 2 0 1</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

ebtor 1	Shanika	simone	saulsberry	Case number (if known)
	First Name	Middle Name	Last Name	Case Hallies (Allem)
Kerra vet i i s	্য : (১) - কেন্টে কেন্ট্ৰাল্ড কিন্তুৰ কৰা কৰা কৰা	z tanganez voran siyakaran. A	-rundanganangangangan kalangan bangurangan an an sungganganganggangan kalangan kalangan su sunggan About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
and E	ousiness name imployer ification Numbo you have used	ers	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	st 8 years	_	Business name	Business name
	e trade names and business as name			
uomg i	ousiness as name	, E	Business name	Business name
		Ē		EIN
		Ē		EIN
Where	e you live	metrovill filologie eta birta poljectara pr	Microphological (n. 1914) - 1944 - Theory Consideration of the characteristic consideration of the consideration of the characteristic con	If Debtor 2 lives at a different address:
		5	5430 n long island D 🌬	
		ī	lumber Street	Number Street
		 r	milwaukee wi 5320	
		C	City State ZIP Co	
			County	County
		а	f your mailing address is different from the one bove, fill it in here. Note that the court will send my notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Ñ	lumber Street	Number Street
		P	O. Box	P.O. Box
		c	ity State ZIP Co	de City State ZIP Code
	ou are choosir		nne restantine nervenimente er sammen menerale menerale menerale menerale er sam er er er er er er er er er er C'heck one:	Check one:
this di bankr	istrict to file for uptcy	r §	Over the last 180 days before filing this petition I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Shanika

simone

saulsberry

Case number (if known)\_

Pа	rt	2.

# **Tell the Court About Your Bankruptcy Case**

			······································					
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	are choosing to file under	☑ Chapter 7						
		☐ Chapter 11						
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	loca your subi	I court for more details self, you may pay with	about how you n cash, cashier's c	nay pay. Typical check, or money	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check		
		☐ I ned App	ed to pay the fee in ins lication for Individuals to	stallments. If yo o Pay The Filing	u choose this op Fee in Installme	otion, sign and attach the ents (Official Form 103A).		
		By la less pay	aw, a judge may, but is than 150% of the officia	not required to, wall poverty line that If you choose the	waive your fee, a at applies to you iis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ir family size and you are unable to nust fill out the <i>Application to Have the</i> with your petition.		
9.	Have you filed for	☑ No						
	bankruptcy within the		District	When		One worth an		
	last 8 years?	103.	District	AALIGIT	MM / DD / YYYY	Case number		
			District	When	MM / DD / YYYY	Case number		
			District	When		Case number		
				<del></del>	MM / DD / YYYY			
10.	Are any bankruptcy cases pending or being	☑ No						
	filed by a spouse who is not filing this case with	Yes.	Debtor			Relationship to you		
	you, or by a business partner, or by an affiliate?		District	When	MM / DD / YYYY	Case number, if known		
			Debtor			Relationship to you		
			District			Case number, if known		
					MM / DD / YYYY			
11.	Do you rent your residence?	□ No.	Go to line 12.					
	i colubilità i	₩ Yes.	Has your landlord obtaine	ed an eviction judge	ment against you?	)		
			No. Go to line 12.					
			part of this bankruptc		viction Judgment	Against You (Form 101A) and file it as		

Page 3 of 57

ebtor 1	Shanika First Name	simone Middle Name	Last Name	saulsberry	<u>/</u>	Case numb	ΘΓ (if known)	· · · · · · · · · · · · · · · · · · ·
	, not really	Wilder Harris	Door Heart	•				
art 3:	Report Abou	t Any Busi	inesses You	Own as a Sc	ole Propriet	tor		
A								
	you a sole prop 1y full- or part-1		No. Go to Pa	rt 4,				
	ness?		Yes. Name a	nd location of b	usiness			
	e proprietorship is less you operate a							
indivi	dual, and is not a		Name of	business, if any				
	rate legal entity su poration, partnersi							
LLC.		•	Number	Street				
sole p	i have more than c proprietorship, use	a						
	rate sheet and atta s petition.	ich it						
to triic	s position.		City			Sta	ite ZIP Code	
			Check t	he appropriate b	oox to describ	e your business:		
						d in 11 U.S.C. § 101(	(27A))	
						ned in 11 U.S.C. § 1		
						S.C. § 101(53A))	- ((- (-))	
						11 U.S.C. § 101(6))		
			_	e of the above	•	3		
Char Bank are y	you filing under oter 11 of the cruptcy Code a you a s <i>mall bus</i>	ca nd <sup>mo</sup>	<i>n set appropria</i> ost recent bala	ate deadlines. If nce sheet, state	you indicate ment of oper	that you are a small I	u are a small busines business debtor, you tement, and federal ir S.C. § 1116(1)(B).	must attach vour
debt	or? definition of <i>small</i>		No. I am not	filing under Cha	apter 11.			
busine	ess debtor, see S.C. § 101(51D).		No. I am filin	g under Chapte kruptcy Code.	r 11, but I am	n NOT a small busine	ess debtor according t	o the definition in
				, ,	r 11 and I am	a small business de	ebtor according to the	definition in the
			Bankrup	tcy Code.	, , , , , , , , , , , , , , , , , , , ,	a oman baomood ad	istor docording to the	domination in the
	l <b>.</b>							
art 4:	Report if You	Own or H	ave Any Ha	zardous Prop	erty or Any	y Property That N	leeds immediate	Attention
Do yo	ou own or have	any [7]	No					
	erty that poses ed to pose a th	or is	Yes. What is	the hazard?				
	minent and	ieat —	· · · · · · · · · · · · · · · · · · ·	, and maken a.				
	ifiable hazard t c health or safe	-						
Or do	you own any	er <b>y</b> t						
	erty that needs	2	If imme	ediate attention i	s needed, wh	y is it needed?		
	ample, do you ow	•					7	
perish that m	able goods, or live just be fed, or a bu eeds urgent repair	estock uilding						
			Where	is the property?				
			********	in property:	Number	Street		
					City		State	ZIP Code

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 4

Shanika

simone

saulsberry

Case number (if known)

Part 5:

# Explain Your Efforts to Receive a Briefing About Credit Counseling

Last Name

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor	1:	•
--------------	----	---

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not required	to	receive	a	briefing	abou
cred	lit counseling	b	ecause d	۶f:	:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

### I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1	Shanika First Name	simone Middle Name	saulsb	perry Case n	umber (if known)	
			THOSE FRANCE	Last Name		arribor (ii nilowii)	
		_					
Pa	rt 6:	Answer The:	se Questions	for Reporting Purp	oses		
16.	What k you ha	ind of debts	do <sup>16a.</sup> A	are your debts prin	narily consumer debts? Considual primarily for a personal, fami	umer debts are defined in 11	U.S.C. § 101(8)
			_	No. Go to line 16b. Yes. Go to line 17.	, , , , , ,	y, or neadonoid purpose.	
			_		narily business debts? Busine investment or through the operation	ss debts are debts that you in on of the business or investment	ocurred to obtain
				No. Go to line 16c. Yes. Go to line 17.			
No over the compage	50.A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		16c. St	ate the type of debts y	ou owe that are not consumer det	ots or business debts.	
17. <b>A</b>	Are you Chapter	filing under 7?	Vo - 1811 January and Anton An	i am not filing under	Chapter 7. Go to line 18.	and the manifestation of the second of the second s	and a state of the
a e: a: a: a:	ny exe xclude dminis re paid vailable	estimate that mpt property d and trative exper that funds w e for distribu cured credito	tafter 2 Yes vis  uses vill be tion	. I am filing under Cha	pter 7. Do you estimate that after a ses are paid that funds will be ava	any exempt property is exclucillable to distribute to unsecure	led and ed creditors?
18. H	ow ma	ny creditors mate that you			<b>1,000-5,000</b>	25,001-50,0	tari i si sa sa saka mbanda sakarana. Isalam a sa kabanga
)\ O\ **********	we?	mate that you	□ 50-9: □ 100- □ 200-	199	5,001-10,000 10,001-25,000	50,001-100,  More than 1	,000
es	ow mue stimate worth	ch do you your assets ?	\$100	50,000 001-\$100,000 .001-\$500,000 001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 millio \$100,000,001-\$500 millio	n	001-\$10 billion 1,001-\$50 billion
es	w muc timate be?	ch do you your liabilitie	\$100,	01-\$100,000 001-\$500,000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million	\$500,000,000 \$1,000,000,0	1-\$1 billion 001-\$10 billion
Part 7	Æ Sig	n Below	\$500,	001-\$1 million	□ \$100,000,001-\$500 millio	n	30 billion
or yo	ou		I have exact.	amined this petition, a	nd I declare under penalty of perju	ry that the information provide	ed is true and
			If I have o of title 11, under Cha	hosen to file under Ch United States Code. I apter 7.	apter 7, I am aware that I may pro understand the relief available un	ceed, if eligible, under Chapt der each chapter, and I choo	er 7, 11,12, or 13 se to proceed
			If no attorn this docum	ney represents me and nent, I have obtained a	d I did not pay or agree to pay som and read the notice required by 11	eone who is not an attorney i	to help me fill out
			l request r	elief in accordance wit	h the chapter of title 11, United St	ates Code, specified in this no	etition.
			understa with a ban	nd making a false stat	ement, concealing property, or obt		
			Signatu	IT OF Debtor 1	institut *	nature of Dahan a	

Official Form 101

Executed on

Signature of Debtor 2

MM / DD /YYYY

Shanika First Name

simone Middle Name

saulsberry

l set Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious acticonsequences?  No Yes	on with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor No Yes	
Did you pay or agree to pay someone who is not an atto  ☐ No ☐ Yes. Name of Person	
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an
Signature of Debtor 1	Signature of Debtor 2
Date MM/DD /YYYY	Date MM / DD / YYYY
Contact phone 414. 3660869	Contact phone
Cell phone	Cell phone
Email address	Email address

Official Form 101

Fill in this information to identify your case:	
Debtor 1 Shanika Simone Saulsberry First Name Middle Name Last Name	
Debtor 2	
(Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Eastern District of Wisconsin	
Case number	☐ Check if this is an
(If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistical Info	rmation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.  Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$1800
1c. Copy line 63, Total of all property on Schedule A/B	\$1800
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$13,731
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ s 0
	· ————
Your total liabilities	\$13,731
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$3,317.00

Official Form 106Sum

5. Schedule J: Your Expenses (Official Form 106J)

0.00

Copy your monthly expenses from line 22c of Schedule J.....

Deb	otor	1

Shanika First Name

Simone

Saulsberry

Case number (if known)

Part 4:	Answer These	Questions for	Administrative :	and	Statistical Records
30.5	Will the Lilean	Macoriolio ioi	Addining and a contract of		AIMINGIOMI LICACIMO

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

1 Yes

7. What kind of debt do you have?

☑ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,717

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

### From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

0.00

or 1	Shanika	Simone	Saulsberry
	First Name	Middle Name	Last Name
or 2			
, if filing)	First Name	Middle Name	Last Name
States	Bankruptcy Court fo	r the: Eastern District of V	Visconsin

Check if this is an amended filing

# Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

☑ No. Go to Part 2. ☐ Yes. Where is the property?	<b></b>		
Street address, if available, or other description	What is the property? Check all that apply.  ☐ Single-family home  ☐ Duplex or multi-unit building	Do not deduct secured classes the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
existing and a second a second and a second	<ul><li>Condominium or cooperative</li><li>Manufactured or mobile home</li></ul>	Current value of the entire property?	Current value of the portion you own?
4444	Land Investment property	\$	\$
City State ZIP Cod	Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one		
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	emmunity property
If you own or have more than one list here:	Other information you wish to add about this in property identification number:	tem, such as local	
If you own or have more than one, list here:  1.2. Street address if available or other description.	Other information you wish to add about this is property identification number:  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D:</i>
	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	Do not deduct secured cla	d claims on <i>Schedule D:</i> ns Secured by Property.
1.2.	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
1.2.	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property?  \$  Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
1.2. Street address, if available, or other description	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property?  \$ Describe the nature of	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
1.2. Street address, if available, or other description	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare Other  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property?  \$  Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
1.2. Street address, if available, or other description	what is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare Other  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property?  \$  Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ of your ownership simple, tenancy by e estate), if known.

Debte		Simone  ddle Name Last Na	Saulsberry	9 number (if known)	
		Las( Na	ine	(1.11.0411)	
1	Street address, if availa	ble, or other description	What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or connective	the amount of any sec Creditors Who Have C	claims or exemptions. Put ured claims on Schedule D: laims Secured by Property.
			Condominium or cooperative  Manufactured or mobile home  Land	Current value of the entire property?	e Current value of the portion you own?
	City	State ZIP Code	☐ Investment property  □ Timeshare ☐ Other	interest (such as fe	e of your ownership e simple, tenancy by ife estate), if known.
	County		Who has an interest in the property? Ch Debtor 1 only Debtor 2 only	heck one.	, ii kilowii.
			☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(see instructions)	community property
			Other information you wish to add abou property identification number:	ut this item, such as local	
2. Add you	i the dollar value of the I have attached for Part	portion you own for a 1. Write that number	all of your entries from Part 1, including an here	y entries for pages	\$
	_				
art 2:	Describe Your	/ehicles			
. Cars	, vans, trucks, tractors,	· y · · · · · · · · · · · · · · · · · ·	st in any vehicles, whether they are registelle, also report it on Schedule G: Executory Co	ered or not? Include any vehicle ontracts and Unexpired Leases.	s
<b>⊠</b> ∧					
3.1.	Make: Model: Year:		Who has an interest in the property? Chec Debtor 1 only Debtor 2 only	ck one. Do not deduct secured cla the amount of any secured Creditors Who Have Clain	Claims on Schodule D.
	Approximate mileage: Other information:		Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
			☐ Check if this is community property (so instructions)	ee \$	\$
If you	own or have more than o	ne, describe here:			
3.2.	Make:		Who has an interest in the property? Check	k ono	
	Model:		Debtor 1 only	the amount of any secured	claims on Schoolule D.
,	Year:		Debtor 2 only	Creditors Who Have Claims	Secured by Property.
	Approximate mileage:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:		At least one of the debtors and another	entire property?	portion you own?
			Check if this is community property (se instructions)	e \$	\$

e:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$	Current value of the portion you own?  \$
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)  Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$	ed claims on Schedule D: ims Secured by Property.  Current value of th portion you own?  \$
	<ul> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> <li>□ Check if this is community property (see instructions)</li> <li>Who has an interest in the property? Check one.</li> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> <li>□ Check if this is community property (see instructions)</li> </ul>	Current value of the entire property?  \$	Current value of the portion you own?  \$
	<ul> <li>□ At least one of the debtors and another</li> <li>□ Check if this is community property (see instructions)</li> <li>Who has an interest in the property? Check one.</li> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> <li>□ Check if this is community property (see instructions)</li> </ul>	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property?	portion you own?  \$
	<ul> <li>□ Check if this is community property (see instructions)</li> <li>Who has an interest in the property? Check one.</li> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> <li>□ Check if this is community property (see instructions)</li> </ul>	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property?	saims or exemptions. Put ad claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ed claims on <i>Schedule D:</i> ms Secured by Property. Current value of the portion you own?
	instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ed claims on <i>Schedule D:</i> ms Secured by Property. Current value of the portion you own?
ə:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
e:	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
<b>:</b>	□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	Current value of the entire property?	Current value of the portion you own?
9:	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	entire property?	portion you own?
	☐ Check if this is community property (see instructions)		
	instructions)	\$	\$
	,		
	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any securer Creditors Who Have Clain	d claims on Schedule D
With the state of	At least one of the debtors and another	entire property?	portion you own?
	☐ Check if this is community property (see instructions)	\$	\$
in one, list here:			
	Who has an interest in the property? Check one	Do not di to di	
		the amount of any secured	claims on Schedule D
		Creditors Who Have Claim	s Secured by Property.
	Debtor 1 and Debtor 2 only	Current value of the	
-	☐ At least one of the debtors and another	entire property?	portion you own?
	☐ Check if this is community property (see	\$	\$
	n one, list here:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?  Current value of the entire property?

Debtor 1

5.

Shanika First Name Simone

Saulsberry

Case number (if known)\_\_\_\_\_

Part 3: Describe Your Personal and Household Items

De	you own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Household goods and	furnishings	·
	_	nces, furniture, linens, china, kitchenware	
	□ No		
	Yes. Describe	sofa love seat	\$ 300.00
			\$
7.	Electronics		
	collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu electronic devices including cell phones, cameras, media players, games	usic
	☐ No	Commence of the Commence of th	
	Yes. Describe	40 inch tv	s 150.00
		THE CONTROL OF A CONTROL OF THE CONT	
8.	Collectibles of value		
	Examples: Antiques and stamp, coin, o	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe	and the second section of the second section in the second section of the second section of the second section of the second section is a second second section of the second second section s	
	Tes. Describe,		\$
a	Equipment for sports a	nd hobbies	seemen and the seemen
٥.	• •	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can	
	and kayaks; o	carpentry tools; musical instruments	oes
	Yes. Describe	andre se en la companya de la compa La companya de la companya della companya del	
	Tes. Describe		<b>\$</b>
10	Firearms		
10.		shotguns, ammunition, and related equipment	
	Yes. Describe		
			5
11.	Clothes		
	Examples: Everyday clot	hes, furs, leather coats, designer wear, shoes, accessories	
	☐ No		
	Yes. Describe	clothes, shoes	\$ 500.00
		The control of the co	<b>"</b>
12.	Jewelry Examples: Everyday jewe gold, silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem	s,
	☑ No		
	Yes. Describe	The state of the s	
	Too. Describe		\$
	Non-farm animals		
	Examples: Dogs, cats, bit	rds, horses	
	☑ No		
	Yes. Describe	A CONTROL OF THE CONT	· · · · · · · · · · · · · · · · · · ·
			\$
		household items you did not already list, including any health aids you did not list	t .
	☑ No		
	Yes. Give specific	The second secon	· ·
	information		Ψ
15.	Add the dollar value of a	all of your entries from Part 3, including any entries for pages you have attached	950.00
	for Part 3. Write that nui	mber here	\$ 850.00

Shanika

Simone Middle Name

Last Name

Saulsberry

Case number (if known)\_

Dа	T.	4.

Describe Your Financial Assets

,	any legal or equitable interest i	n any of the following?	Current value portion you of Do not deduct s or exemptions.	wn?
16. <b>Cash</b> <i>Examples</i> ; Money v	Ou have in your wallet in your bo	amo in a cofe demosit have and a fine		
□ No	ou have in your wance, in your ne	ome, in a safe deposit box, and on hand when you file your petition		
		Cash:		
		Cash:	\$	50.00
17. Deposits of money Examples: Checking and other	, savings, or other financial acco	ounts; certificates of deposit; shares in credit unions, brokerage houses, multiple accounts with the same institution, list each.		
☑ Yes		Institution name:		
	17.1. Checking account:	Meta Bank	\$	50.00
	17.2. Checking account:		¢	
	17.3. Savings account:		Φ	<del></del>
	17.4. Savings account:		\$	
	17.5. Certificates of deposit:		\$	
	17.6. Other financial account:		\$	
	17.7. Other financial account:		\$	
	17.8. Other financial account:		\$	
	17.9. Other financial account:		\$ \$	
			Φ	
8. Bonds, mutual funds	, or publicly traded stocks			
✓ No	s, investment accounts with broke	erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
			<b>A</b>	
			\$	
			\$ \$	
			· ————————————————————————————————————	
<ol> <li>Non-publicly traded s</li> <li>an LLC, partnership.</li> </ol>	stock and interests in incorpor	ated and unincorporated businesses, including an interest in	· ————————————————————————————————————	
☑ No	and joint venture		· ————————————————————————————————————	
No Yes. Give specific	stock and interests in incorpor and joint venture Name of entity:	% of ownership:	\$\$	
☑ No	Name of entity:	% of ownership:  0% 0%	· ————————————————————————————————————	

Debtor 1	Shanika	Simone		Saulsberry	Case number (if known)	
, color i	First Name	Middle Name	Last Name		Cass Harrison (in known)	
_						
	•		•	ole and non-negotiable		
				s' checks, promissory no r to someone by signing		
<b>⊠</b> No						
☐ Yes	s. Give specific	Issuer name:				
	rmation about m				······································	\$
			·			- \$
						- \$
	ment or pension		40443 4004	N. 11-20		
Examp.  □ No		KA, ERISA, Keogn, 4	4U1(K), 4U3(D	), thriπ savings accounts	s, or other pension or profit-sharing plan	าร
	s. List each					
	count separately.					
	ount separatery.	Type of account:	Institution r	name:		
230	ount separatery.	Type of account: 401(k) or similar plan				\$
230	ount separately.		; <u></u>			
230	ount separatery.	401(k) or similar plan	; <u></u>			\$
230	оши зарагаю́у.	401(k) or similar plan	; <u></u>			_
230	оши зарагаюў.	401(k) or similar plan Pension plan: IRA:	; <u></u>			\$\$ \$\$
	оши зарагаю́у.	401(k) or similar plan Pension plan: IRA: Retirement account:				\$\$ \$ _\$\$
330	оши зарагаю́у.	401(k) or similar plan Pension plan: IRA: Retirement account: Keogh: Additional account:				\$\$ \$ \$\$ \$\$
330	оши зарагаю́у.	401(k) or similar plan Pension plan: IRA: Retirement account: Keogh:				\$\$ \$ _\$\$
		401(k) or similar plan Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:				\$\$ \$ \$\$ \$\$
Securit	y deposits and <sub>l</sub>	401(k) or similar plan Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:				\$\$ \$ \$\$ \$\$
<b>Securit</b> Your sh <i>Examp</i> i	ry deposits and phare of all unused	401(k) or similar plan Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:	made so that	you may continue service		\$\$ \$ \$\$ \$\$
Securit Your sh Example	ry deposits and phare of all unused les: Agreements	401(k) or similar plan Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account:	made so that	you may continue service	ce or use from a company	\$\$ \$ \$\$ \$\$

companies, or others		
□ No		
<b>1</b> Yes	Institution name or individual:	
	Electric:	
	Gas:	\$
	Heating oil:	\$
	Security deposit on rental unit: Berrada Apartments	\$ 900.0
	Prepaid rent:	
	Telephone:	\$
	Water:	\$
	Power 46 of 2	T

23. Annuities (A

Other:

Anı	nuities (A contract for	a periodic payment of money to you, either for life or for a number of years)	
Ą	No		
	Yes	Issuer name and description:	
			\$
			\$
			\$

Debtor 1	Shanika	Simone	Saulsberry	Casa sumbar	
	First Name	Middle Name Last Name		Case number (if known)	
24. Interest	s in an educatio	n IRA, in an account in a	qualified ABLE program, or	under a qualified state tuition program	
26 U.S.	C. §§ 530(b)(1), 5	29A(b), and 529(b)(1).		and a quamer oute tailor program	
<b>☑</b> No					
Yes		Institution name and	description. Separately file the	e records of any interests.11 U.S.C. § 521	(a):
			, as a separately me an	5 755745 51 dily interests. 11 0.3.C. 9 321	(C).
					. \$
					. \$
		···	· · · · · · · · · · · · · · · · · · ·		- \$
_					
25. Trusts, e	equitable or future able for your ben	re interests in property (c	other than anything listed in	line 1), and rights or powers	
<b>☑</b> No	able for your bein	ient.			
	Give specific		and the second of the second o	and the second of the second o	
	mation about then	n			•
		The state of the s	- Anna de Maria de Maria de la compansión de la compansió	the second of th	<b>3</b>
26. Patents,	copyrights, trad	lemarks, trade secrets, aı	nd other intellectual propert	у	
Example	s: Internet domair	n names, websites, proceed	ds from royalties and licensing	g agreements	
<b>☑</b> No			The state of the s		
Yes.	Give specific		The state of the s		
iniorr	nation about them				\$
27 Licenses	franchises es			to the first of the second	•
Example:	s: Building permits	d other general intangible	<b>?S</b> Prative association holdings li	quor licenses, professional licenses	
<b>⊠</b> No		o, exercisive needles, coope	erative association noidings, il	quor licenses, professional licenses	
	Give specific	en e	The second secon	and the second s	
	nation about them	<b>L</b>			! <b>¢</b>
		to the second of the second	Commence of the commence of th	and the second s	, <b>4</b>
Money or pr	operty owed to	you?			Oramant costera at the
					Current value of the portion you own?
					Do not deduct secured claims or exemptions.
28. Tax refun	ds owed to you				oranio or oxompaoria.
☑ No	•				
Yes. 0	Give specific infor	mation	and the second s		
a	about them, includ	ling whether		Federal:	\$
y a	ou already filed then the contract of the cont	ne returns		State:	\$
	-			Local:	\$
_			and the second of the second o		
29. Family su					
<i>Examples</i> <b>☑</b> No	. rast que or lump	p sum alimony, spousal su	oport, child support, maintena	nce, divorce settlement, property settleme	ent
	Norman and the form	pathop has a consequence of the	Commence of the second of the	en e	
Tres. G	Give specific inform	nation		All	
				Alimony:	\$
				Maintenance:	\$
				Support:	\$
				Divorce settlement:	\$
20. 046			Marine Control of the	Property settlement:	\$
Examples:	ounts someone d Unpaid wages, d	lisability insurance paymen	ts disability benefits sick	, vacation pay, workers' compensation,	
	Social Security b	enefits; unpaid loans you r	nade to someone else	, vacation pay, workers compensation,	
₩ No					
Yes. G	ive specific inform	nation	Control of the Contro	·	
					\$

Official Form 106A/B

Shanika

Simone Saulsberry	Case number (if known)	
Last (vali)e		
e		
	credit, homeowner's or renter's insurance	
	or control of the first and ance	
ompany Company name:	Beneficiary:	Surrender or refund value
its value	,	
		<u> </u>
		<u> </u>
s due vou from someone who has died		\$
ving trust, expect proceeds from a life insurance died.	e policy, or are currently entitled to receive	
on		_
	The second secon	<u> </u>
whether or not you have filed a lawsuit or ment disputes insurance claims or sight to an	ade a demand for payment	
-		
(1.000.000.000.000.000.000.000.000.000.0		
	No	<b>\$</b>
	or the debter and rights	
promote a construction of the		
\$		
Note that the second of the se	more and the second	<b>3</b>
_		
	and the second of the second o	
		\$
	The second secon	
our entries from Part 4, including any entrie	s for pages you have attached	050.00
ere	<b>-</b>	\$950.00
siness-Related Property You Own	or Have an Interest In. List any	real estate in Part 1.
or equitable interest in any business-related	property?	
•	property:	
		0
		Current value of the portion you own?
		Do not deduct secured claims
seione vou alreadud		or exemptions.
опона уой анеаду ваглед		
and the second s	the state of the s	
		\$
and supplies		
s, software, modems, printers, copiers, fax machines,	rugs, telephones, desks, chairs, electronic device	9S
	life insurance; health savings account (HSA); ompany Company name:  s due you from someone who has died ring trust, expect proceeds from a life insurance died.  on	is life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance company its value

page 8

Debtor 1	Shanika First Name	Simone  Middle Name Last Name	Saulsberry	Case number (# known)	
10. Machir	nery, fixtures,	equipment, supplies you use	e in business, and tools of y	our trade	
<b>☑</b> No					
∟i Ye:	s. Describe	•			\$
41. Invento No	-		EACH MALE NOTE IN THE TAX THE MALE AND TRANSPORT OF THE TAX TO A T		with the second
	s. Describe	* *			\$
				the state of the s	anad
		hips or joint ventures			
₩ No					
₩ Ye	s. Describe	Name of entity:		% of ownership:	
		<del></del>		•	\$
					\$\$
13. <b>Custon</b> No		ing lists, or other compilation	ns		
		s include personally identifia	able information (as defined	in 11 U.S.C. § 101(41A))?	
	☐ No			Note that Model and the second of the second	
	Yes. Des	scribe			<b>\$</b>
				e de les estados estados estados estados en estados en estados en entre en estados en estados en estados en estados en entre en estados en estados en entre en entre en entre en entre en entre en entre ent	
14. <b>Any bu</b> No		d property you did not alread	ly list		
☐ Yes	s. Give specific				¢
info	ormation				\$
					\$
		<del></del>			\$
					\$
				***************************************	\$
اد <b>۸</b> ماما ۱۹ ما	o dollos valva	of all of varue antrice from D	- E including any autor		
		of all of your entries from Panumber here			\$0.00
	ŀ				
Part 6:		<b>Any Farm- and Commerci</b> or have an interest in farmlan		rty You Own or Have an Interest	in.
	Go to Part 7.	any legal or equitable interes	st in any farm- or commerci	al fishing-related property?	
	Go to line 47				
					Current value of the
					portion you own?  Do not deduct secured claims
7. Farm a	nimals				or exemptions.
		poultry, farm-raised fish			
☑ No					
<b>∟</b> Yes	<b>3</b>	•		the first constituent to the common to a minute of many and a constituent of the constitu	
					\$

Debtor 1	Shanika First Name	Simone  Middle Name Last Name	Saulsberry		Case number (if known)		
		Last Name					
	either growing o	r harvested					
Ø No		The second secon	ting and the eliterature day of leave to the leave to the leave to		the state of the s		
☐ Yes info	. Give specific						
49. <b>Farm a</b> ı	nd fishing equipm	ent, implements, machiner	V. fixtures, and too	als of trade	Companies and the control of the con	\$	······································
<b>₩</b> No					The second secon		
☐ Yes				***************************************	The second secon		
50 Farm or			Market Committee of the	to the contraction of the contra	er om er more and an er of the second	\$	
Ø No	iu nsning suppne	s, chemicals, and feed					
		And the second s	te company of the second of the second	The state of the s	The second development of the second		
	! ! **********************************	And the second s	experience of visits a second contract from			\$	
<b>₩</b> No		al fishing-related property y	ou did not already	list			
Yes.	Give specific mation	to the state of th	Amore equipments (	Martine Control of the control of th	maketi atmos program ti sasa atmos a sasa atmos a sasa atmos a sasa atmos a sasa a sasa a sasa a sasa a sasa a	÷	
		the second secon			the state of the s	\$	
52. Add the for Part	dollar value of all 6. Write that num	l of your entries from Part ( ber here	i, including any en	tries for page:	s you have attached	\$	0.00
				***************************************	······································		
53. Do you l	nave other proper	ty of any kind you did not a			You Did Not List Above		
Zi No		ntry club membership	e disease, and a factorise of a second				
Yes.	Give specific				:	\$	
Intorr	nation					\$	
		and the second of the second o	**** **** * * * * * * * * * * * * * *	Company of the second second second second	the state of the s	\$	
54. Add the	ioliar value of all	of your entries from Part 7.	Write that number	here	······	\$	0.00
Part 8:	List the Total	s of Each Part of this	Form				
55. Part 1: To	tal real estate, lin	e 2			-	s	0.00
56. Part 2: To	tal vehicles, line	5	\$	0.00			
57. Part 3: To	tal personal and l	household items, line 15	\$	850.00			
58. Part 4: To	tal financial asset	ts, line 36	\$	950.00			
59. <b>Part 5: To</b>	tal business-relat	ed property, line 45	\$	0.00			
60. <b>Part 6: To</b>	tal farm- and fishi	ng-related property, line 52	2 \$	0.00			
61. Part 7: To	tal other property	not listed, line 54	+\$	0.00			
62. Total pers	onal property. Ad	d lines 56 through 61	<b>\$</b>	1800.00	Copy personal property total →	+\$	1800.00
			***************************************	The second section of			,
33. Total of al	property on Sch	edule A/B. Add line 55 + line	62	***************************************		\$	1800.00

Debtor 1	anika Simone	Saulsberry	/	
	Name Middle N	ame Last Name		
Debtor 2 (Spouse, if filing) First	Name Middle N	ame Last Name		
United States Bank	ruptcy Court for the:Eastern Di	strict of Wisconsin		
Case number				☐ Check if this is a
(If known)				amended filing
Official For	m 106C			
***************************************	·	4 34		
Schedu	e C: The Pr	operty You	Claim as Exempt	04/19
Using the property space is needed, fil	you listed on Schedule A/B:	Property (Official Form 106	ogether, both are equally responsible for s A/B) as your source, list the property that Additional Page as necessary. On the top	you claim as exempt. If more
pecific dollar am	ount as exempt. Alternativ	ely, you may claim the ful	amount of the exemption you claim. Or Il fair market value of the property bein r health aids, rights to receive certain l	g exempted up to the amount
etirement funds-	-may be unlimited in dolla	r amount. However, if you	claim an exemption of 100% of fair ma	rket value under a law that
imits the exempti	on to a particular dollar an	nount and the value of the	property is determined to exceed that	amount, your exemption
vouid be infilled t	the applicable statutory	amount.		
Part 1: Ident	ify the Property You Cl	aim as Exempt		
	***	·		
1. Which set of e	exemptions are you claimi	ng? Check one only, even i	if your spouse is filing with you	
			. your opoute to ming war you.	
You are cla	aiming state and federal non	bankruptcy exemptions. 11		
You are cla	aiming state and federal non aiming federal exemptions.	bankruptcy exemptions. 11 11 U.S.C. § 522(b)(2)		
You are cla	aiming federal exemptions.	11 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
You are cla	aiming federal exemptions.	11 U.S.C. § 522(b)(2)		
<ol> <li>You are classified as a second of the second</li></ol>	aiming federal exemptions.  In the property and line	11 U.S.C. § 522(b)(2)  /B that you claim as exemon  On Current value of the	U.S.C. § 522(b)(3)	Specific laws that allow exemption
<ol> <li>You are classified.</li> <li>For any proper</li> <li>Brief descript</li> </ol>	aiming federal exemptions.  rty you list on Schedule A	11 U.S.C. § 522(b)(2)  /B that you claim as exemon  Current value of the portion you own	U.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim	Specific laws that allow exemption
You are class.  2. For any prope  Brief descript	aiming federal exemptions.  In the property and line	11 U.S.C. § 522(b)(2)  /B that you claim as exemon  On Current value of the	U.S.C. § 522(b)(3)  apt, fill in the information below.	Specific laws that allow exemption
You are class.  2. For any prope  Brief descript	aiming federal exemptions.  rty you list on Schedule A  lon of the property and line that lists this property	/B that you claim as exem on Current value of the portion you own Copy the value from Schedule A/B	U.S.C. § 522(b)(3)  Apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
2. For any prope Brief descript Schedule A/B Brief description:	aiming federal exemptions.  In the property and line	/B that you claim as exem  On Current value of the portion you own  Copy the value from	u.s.c. § 522(b)(3)  Apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.	
2. For any prope Brief descript Schedule A/B	rty you list on Schedule A donor the property and line that lists this property  household items	/B that you claim as exem on Current value of the portion you own Copy the value from Schedule A/B	U.S.C. § 522(b)(3)  Apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption $322.03$
2. For any proper Brief description: Line from Schedule A/B:	rty you list on Schedule A donor the property and line that lists this property  household items	/B that you claim as exem on Current value of the portion you own Copy the value from Schedule A/B	u.s.c. § 522(b)(3)  Appt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{1}{2}\$ \$\frac{850.00}{100\%}\$ of fair market value, up to	
2. For any proper Brief description: Line from	rty you list on Schedule A donor the property and line that lists this property  household items	/B that you claim as exem on Current value of the portion you own Copy the value from Schedule A/B	u.s.c. § 522(b)(3)  Appt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{1}{2}\$ \$\frac{850.00}{100\%}\$ of fair market value, up to	
2. For any prope  Brief description: Line from Schedule A/B: Brief description: Line from	rty you list on Schedule A donor the property and line that lists this property  household items	/B that you claim as exemon Current value of the portion you own  Copy the value from Schedule A/B  \$ 850.00	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}  \$\frac{950.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}	522.03
2. For any proper Brief description: Line from Schedule A/B: Brief description:	rty you list on Schedule A donor the property and line that lists this property  household items  Pt 3  total financial assets	/B that you claim as exemon Current value of the portion you own  Copy the value from Schedule A/B  \$ 850.00	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{\sqrt{3}}{2} \\$ \frac{850.00}{2}   100\% of fair market value, up to any applicable statutory limit	
2. For any proper Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief	rty you list on Schedule A donor the property and line that lists this property  household items  Pt 3  total financial assets	/B that you claim as exemon Current value of the portion you own  Copy the value from Schedule A/B  \$ 850.00	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}  \$\frac{950.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}	522.03
2. For any proper Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Control of the schedule A/B:	rty you list on Schedule A donor the property and line that lists this property  household items  Pt 3  total financial assets	/B that you claim as exemon Current value of the portion you own  Copy the value from Schedule A/B  \$ 850.00	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}  \$\frac{950.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}	522.03
2. For any proper Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief description:	rty you list on Schedule A donor of the property and line that lists this property  household items  Pt 3  total financial assets	/B that you claim as exemon Current value of the portion you own  Copy the value from Schedule A/B  \$ 850.00	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}  \$\frac{950.00}{100\% \text{ of fair market value, up to any applicable statutory limit}}	522.03
2. For any proper Brief description: Line from Schedule A/B:	rty you list on Schedule A donor of the property and line that lists this property  household items  Pt 3  total financial assets  Pt 4	### 11 U.S.C. § 522(b)(2)  ##################################	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% of fair market value, up to any applicable statutory limit}  \$\frac{950.00}{100\% of fair market value, up to any applicable statutory limit}	522.03
2. For any proper Brief description: Line from Schedule A/B: 3. Are you claim	rty you list on Schedule A lion of the property and line that lists this property  household items  Pt 3  total financial assets  Pt 4	### Add to the control of the contro	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% of fair market value, up to any applicable statutory limit}  \$\frac{950.00}{100\% of fair market value, up to any applicable statutory limit}	522.03 59905
2. For any proper Brief description: Line from Schedule A/B: 3. Are you claim	rty you list on Schedule A lion of the property and line that lists this property  household items  Pt 3  total financial assets  Pt 4	### Add to the control of the contro	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% of fair market value, up to any applicable statutory limit}  \$\frac{950.00}{100\% of fair market value, up to any applicable statutory limit}	522.03 59905
Brief description: Line from Schedule A/B: Are you claim (Subject to adjunct to a	rty you list on Schedule A donor of the property and line that lists this property  household items  Pt 3  total financial assets  Pt 4  ing a homestead exemption ustment on 4/01/22 and ever	### And Provided Head of the second on Current value of the portion you own    Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.  \$\frac{850.00}{100\% of fair market value, up to any applicable statutory limit}  \$\frac{950.00}{100\% of fair market value, up to any applicable statutory limit}	522.03 59905

Shanika

Simone

Saulsberry

Case number (if known)

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$	<b>-</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>Q</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b></b>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B: ———		any applicable statutory limit	
Brief description:	\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description: Line from	\$	\$ 100% of fair market value, up to	
Schedule A/B:		any applicable statutory limit	
Brief description:	\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B: Brief		any applicable statutory limit	
description: ————————————————————————————————————	\$	\$\$ 100% of fair market value, up to	
Schedule A/B: ———		any applicable statutory limit	
Brief description:	\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:		any applicable statutory limit	

	information to identify				
Debtor 1	Shanka First Name	SIMORE Saulsborry  Middle Name Last Name			
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name Last Name			
		Eastern District of Wisconsin			
Case numbe					
(If known)				☐ Check	if this is a
					led filing
Officia	l Form 106D				
Sche	dule D: Cred	litors Who Have Claims Secu	uned has Date	. 4	
Be as com information additional	plete and accurate as p n. If more space is need pages, write your name reditors have claims se	possible. If two married people are filing together, both are ded, copy the Additional Page, fill it out, number the entries and case number (if known).  Secured by your property?  It this form to the court with your other schedules. You have reported.	re equally responsible ies, and attach it to thi	for supplying correction form. On the top of	12/15 et fany
103.	Fill in all of the information	in below.	nothing else to report on	n this form.	
TOT CUCIT (	nami. Il more man one di	tor has more than one secured claim, list the creditor separat reditor has a particular claim, list the other creditors in Part 2	) Tanadit of Olding	Column B Value of collateral	Column C
As much	as possible, list the claims	is in alphabetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	<b>portion</b> If any
.1		Describe the property that secures the claim:	<b>s</b>	\$	s.
Creditor's N	ame			_ \$	<b>3</b>
Number	Street				
		As of the date you file, the claim is: Check all that ap	opły.		
		☐ Contingent ☐ Unliquidated			
City	State ZIP	Code Disputed			
Who owes	the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1	,	An agreement you made (such as mortgage or secure	ad		
		car loan)	₽d		
Debtor 2					
Debtor 1	and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 At least of	ne of the debtors and anothe	er Judgment lien from a lawsuit			
Debtor 1 At least of	ne of the debtors and another	er Statutory lien (such as tax lien, mechanic's lien)  Other (including a right to offset)			
Debtor 1 At least of Check if communications	one of the debtors and another this claim relates to a nity debt	er Judgment lien from a lawsuit  Other (including a right to offset)			
Debtor 1 At least of Check if communicate debt w	one of the debtors and another this claim relates to a nity debt	er Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	Mile Sallhouseuse 4 % ( Carbon Markenbuck) für 1 Markenbucksberger ( Markenbucksberger ( Markenbucksberger ( M	il kala kalagagaga marija sa kasabagaga ka sa	Manager of the August
Debtor 1  At least of Check if communicate debt w	one of the debtors and another this claim relates to a nity debt as incurred	er Judgment lien from a lawsuit  Other (including a right to offset)	More authorische und ein zu Gestellungsgeben der Stelle von der	**************************************	alkova ozni ozni i soki i kolens
Debtor 1 At least of Check if commun Date debt w	ne of the debtors and another this claim relates to a nity debt as incurred	er Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	More definition for the Continue of the Contin	\$\$	allerese se a suo angue
Debtor 1  At least of Check if communicate debt w	one of the debtors and another this claim relates to a nity debt as incurred	Describe the property that secures the claim:	The Manufactures of System and an investment of the Annual Conference of the State	\$\$	aller or a superior superior of the superior o
Debtor 1 At least of Check if commun Date debt w	ne of the debtors and another this claim relates to a nity debt as incurred	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app	\$	**************************************	allerthouse we a look shaped
Debtor 1 At least of Check if community Date debt w  Creditor's Na Number	ne of the debtors and another this claim relates to a nity debt as incurred	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app	S ply.	**************************************	ander cer un anna angag
Debtor 1 At least of Check if commun Date debt w	ne of the debtors and another this claim relates to a nity debt as incurred	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app  Contingent  Unliquidated	Sply.	. \$\$	and the same of the same
Debtor 1 At least of Check if commun Date debt w  2  Creditor's Na Number	one of the debtors and another I this claim relates to a nity debt as incurred  Street	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app  Contingent Unliquidated Disputed	S	\$ \$\$	and the second s
Debtor 1 At least of Check if community of Creditor's Na Number City  Who owes the Debtor 1 of Check if Community of Check if Community of Check if Community of Check if Chec	this claim relates to a nity debt as incurred  Street  State ZIP Cone debt? Check one.	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app Code Disputed Nature of Ilen. Check all that apply.		in the subscription of energy in such moderators and in such as the subscription of the the su	STRATE LET 1.55 - NAMES
Debtor 1  At least of community of the c	this claim relates to a nity debt as incurred  Street  State ZIP Cone debt? Check one.	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app Code Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)		** SAN TANAH SI SA	ander un auto angul
Debtor 1  At least of community of the c	this claim relates to a nity debt as incurred  Street  State ZIP Cone debt? Check one.	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app Code Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		\$\$	and the second s
Debtor 1  At least of community of the c	this claim relates to a nity debt as incurred  Street  State ZIP Cone debt? Check one.	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app Code Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit		S S	Section 1997 to the Sectio
Debtor 1 Creditor's Na Number  City  Who owes tt Debtor 1 a Debtor 2 a At least of	this claim relates to a nity debt as incurred  Street  State ZIP Come debt? Check one.  Only and Debtor 2 only are of the debtors and another this claim relates to a lity debt	Describe the property that secures the claim:  As of the date you file, the claim is: Check all that app Code Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)		S S	AND THE RESERVE AND A SECOND STREET, S

Fill in t	his infor	mation t	o identify yo	our case:								
	Ch	مباليم	Cimana	Cavilaham								
Debtor 1		anika <sup>st Name</sup>	Simone	Saulsberr	<u>y</u>	Last Name						
Debtor 2	if filing) Fire	st Name		Middle Name		Last Name	<del></del>					
			ourt for the	Dis	strict of							
		мирюў ос			strict o						☐ Chec	ck if this is an
Case nu (If known							****				ame	nded filing
Offici	al Fo	rm 10	06E/F									
Scho	edul	e E/F	: Cred	litors \	Nho	Have	Unsec	ured Cla	ims			12/15
List the c A/B: Pro creditors needed,	other pa perty (O s with pa copy the itional pa	rty to any fficial Fo artially se Part yo ages, wri	y executory rm 106A/B) cured claim u need, fill it te your nam	contracts or and on <i>Sche</i> is that are lis	unexp dule G ted in the e umber	ired leases the control of the contr	at could resulontracts and reditors Who	laims and Part 2 It in a claim. Also Unexpired Lease Have Claims Se eft. Attach the Co	o list exe es (Offici ecured by	ecutory co ial Form 10 y <i>Property</i> :	ntracts on S I6G). Do not . If more spa	c <i>hedul</i> e include any ce is
	·							· · · · · · · · · · · · · · · · · · ·				······································
□ N	lo. Go to		priority un	secured clain	ns aga	inst you?						
<b>☑</b> Y												
each nonpi unsec	claim list riority am cured cla	ted, ident nounts. As ims, fill o	ify what type s much as po ut the Contin	of claim it is. i ssible, list the uation Page o	f a cla claims f Part	m has both prices in alphabeticand. If more than	ority and nonp I order accord one creditor h	nsecured claim, li riority amounts, lis ing to the creditor' olds a particular cl ruction booklet.)	st that cla 's name.	im here an If you have	d show both to more than to	oriority and vo priority
(1 01 8	an expiai	iation of	bach type of	ciaiiti, see ule	nouu		### ## ## <b>5</b> #	action booklet.)	To	tal claim	Priority	Nonpriority
<del></del> 1											amount	amount
<sup>2.1</sup> Ca	ine and	l Weinei	r Co		l a	st A digits of ac	count number	2 9 7 1	l s	148.00	<b>S</b>	s
	ity Creditor's											
PO	box 55	Street			_ WI	nen was the del	ot incurred?					
					- As	of the date vou	i file. the claim	ı is: Check ali that a	vlage.			
	erman o	oaks	CA	91413	_	Contingent	,					
City			State	ZIP Code	_	Unliquidated						
prompt.			t? Check one.	•		Disputed						
	Debtor 1 o Debtor 2 o	•			75.	f DDIODIT	V	-1				
		ınd Debtor	2 only			pe of PRIORIT		ciaim:				
			ebtors and ano	ther		Domestic suppo	-					
				munity debt			•	ou owe the governm	ent			
		subject to				intoxicated	or personal inju	ıry while you were				
ZŽ,		subject it	) Uliset?									
								5489454-2004-15				
2.2 Am	neri colle			and the selections of remain and the selections				1 2 4 3				<b>\$</b>
18	51 S Alv	verno R	d	***************************************	WI	en was the deb	ot incurred?	····				
Numi	ber	Street			As	of the date you	file, the claim	is: Check all that a	ipply.			
Ma	ntowac		Wi	54220		Contingent						
City			State	ZIP Code		Unliquidated						
Who	o incurre	d the deb	t? Check one.			Disputed						
	Debtor 1 o	•			Tve	pe of PRIORIT	Y unsecured	claim:				
	Debtor 2 o					Domestic suppo		vianii.				
		nd Debtor					-	ou owe the governme	ent			
			btors and ano					ove the government of the second seco	on.			
LI (	Check if t	this claim	is for a com	munity debt	-	intoxicated	or porsonal hiju	, you were				
<b>2</b>	No	subject to	offset?			Other. Specify _	······································		<del></del>			
	Voc											

D	eh	to	•	1

Simone Saulsberry

Middle Name Last Name

Case number (if known)

nating any entries on the	s page	, number the	m beginning with 2.3, followed by 2.4, and so forth. Total claim Priority amount	Nonpriori amount
Convergent Outsourd	cing		_ Last 4 digits of account number 2 9 1 1 \$ 902.00 \$	
Priority Creditor's Name			Last 4 digits of account number 2 0 1 1 \$ 902.00 \$	\$
800 sw 39th st			When was the debt incurred?	
Aumber Street				
		· · · · · · · · · · · · · · · · · · ·	As of the date you file, the claim is: Check all that apply.	
Renton	WA	98057	Contingent	
City	State	ZIP Code	Unliquidated	
Who incurred the debt? Ch	eck one		Disputed	
Debtor 1 only			Type of PRIORITY unsecured claim:	
Debtor 2 only				
Debtor 1 and Debtor 2 only			Domestic support obligations	
At least one of the debtors	and ano	ther	Taxes and certain other debts you owe the government	
Check if this claim is for	a com	munity dabt	Claims for death or personal injury while you were intoxicated	
	u com	manny debi	Other. Specify	
s the claim subject to offse	t?			
<b>√</b> No				
Yes				
		"PSP orderlede" is no received a section of the	gagaragen den figligen mangen en e	Contraction for a layer of which
convergent outsourcin	g		Last 4 digits of account number 7 7 4 8 \$_1,221.00 \$	¢
riority Creditor's Name 300 sw 39th st				Ψ
umber Street			When was the debt incurred?	
			An of the data way of the state of	
			As of the date you file, the claim is: Check all that apply.	
	WA	98057	Contingent	
ity	State	ZIP Code	Unliquidated	
/ho incurred the debt? Che	ck one.		☐ Disputed	
Debtor 1 only			Type of PRIORITY unsecured claim:	
Debtor 2 only				
Debtor 1 and Debtor 2 only			Domestic support obligations	
At least one of the debtors a	nd anotl	ner	<ul> <li>Taxes and certain other debts you owe the government</li> <li>Claims for death or personal injury while you were</li> </ul>	
Check if this claim is for	a comr	nunity debt	intoxicated  Other. Specify	
the claim subject to offset	?			
<b>Í</b> No				
l v				
		CONTROL CONTROL STATE VIEWS AND STATES		the trace of the same and the
be group healthcare g	roup	····	Last 4 digits of account number 3 2 5 7 \$ 400.00 \$	\$
only ordunors realing				
mber Street	····		When was the debt incurred?	
309 technology pkwy			As of the date you file, the claim is: Check all that apply.	
edarfalls la	,	50640		
	ate	50613 ZIP Code	Contingent	
		EIT COUR	☐ Unliquidated ☐ Disputed	
ho incurred the debt? Chec	k one.		- Disputed	
Debtor 1 only			Type of PRIORITY unsecured claim:	
Debtor 2 only			Domestic support obligations	
Debtor 1 and Debtor 2 only			Taxes and certain other debts you owe the government	
At least one of the debtors and	d anothe	er	Claims for death or personal injury while you were	
Check if this claim is for a	comm	unity debt	intoxicated  Other. Specify	malah engga salah sa nejera, sanakakan gangsake
the claim subject to offset?				
No				

Dehtor	1

Simone Middle Name

Sa	ul	st	е	rry	

_		
Case	number	(if known)

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

	m beginning with 2.3, followed by 2.4, and so forth.	Total claim Prio amo	rity Non unt amo
Enhanced Recovery Priority Creditor's Name	Last 4 digits of account number 0 0 4 1	s 193 s	\$
po box 57547 Number Street	When was the debt incurred?		
Manual 2(166)			
	As of the date you file, the claim is: Check all that apply.		
jacksonville florida 32241	Contingent		
City State ZIP Code	Unliquidated		
Who incurred the debt? Check one.	☐ Disputed		
Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only			
Debtor 1 and Debtor 2 only	Domestic support obligations		
At least one of the debtors and another	<ul> <li>Taxes and certain other debts you owe the government</li> <li>Claims for death or personal injury while you were</li> </ul>		
Check if this claim is for a community debt	intoxicated  Other. Specify		
s the claim subject to offset?			
No			
Yes			
-three was similar and and growing papared in curs with 1 a per time on the state of the baseline spokens with 1 a set to war.		n 190 militario de la companio de l	Silvini kraliki kawanga pangga politika da 1911.
enhanced recovery	Last 4 digits of account number 6 2 5 2	\$ 382.00 <sub>\$</sub>	\$
riority Creditor's Name		¥	v
umber Street	When was the debt incurred?		
oo box 57547	An of the data was fit if the same		
-1	As of the date you file, the claim is: Check all that apply.		
acksonville florida 32241	Contingent		
ity State ZIP Code	Unliquidated		
Who incurred the debt? Check one.	☐ Disputed		
Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only			
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>		
At least one of the debtors and another	Claims for death or personal injury while you were		
Check if this claim is for a community debt	intoxicated  Other. Specify		
the claim subject to offset?	— Other Specify		
1 No			
Yes			
redit security Accept	er jamen – 1904 – entjättigiskun francis (sasta sport materia) – väästidti. En järkeitillä hälden dinnet järkeitillä ja vääse tunnas skaltingensellente järkeitillä ja vääse tunnas skaltingensellente järkeitillä ja vääse tunnas skaltingensellente järkeitillä ja vääset ja vä	erozania w de como mor a como e de se de se de se de se	an all the state of the second
ority Creditor's Name	Last 4 digits of account number m 7 4 8 \$	6,797.00 \$	\$
225 w main st ste 101	When were the 1111		
mber Street	When was the debt incurred?		
	As of the date you file, the claim is: Check all that apply.		
esa az 85201	Contingent		
y State ZIP Code	☐ Unliquidated		
ho incurred the detack	☐ Disputed		
ho incurred the debt? Check one.	_		
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	☐ Domestic support obligations		
At least one of the debtors and another	Taxes and certain other debts you owe the government		
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	tte ved i common vicinalistic vicinistis spanistic vicinistis vic	n til 1771 til 240 sværmidde
the claim subject to offset?	Other. Specify		
are claim Subject to offset?			

na	htor	1

Simone Saulsberry

Middle Name Last Name

Case	number	(if know
Case	Halliper	(a Know

listing any entries on this pag	e, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprio amount
Ad Astra Recovery service	es .	Last 4 digits of account number 2 7 2 5	\$806.00	\$	. \$
7330 w 33rd st ste 118					
Number Street		When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	07005				
wichita ks City State	67205 ZIP Code	☐ Unliquidated			
City State	ZIP Code	Disputed			
Who incurred the debt? Check or	e.	□ Disputed			
Debtor 1 only		Type of PRIORITY unsecured claim:			
Debtor 2 only					
Debtor 1 and Debtor 2 only		Domestic support obligations			
At least one of the debtors and ar	other	Taxes and certain other debts you owe the government			
_		☐ Claims for death or personal injury while you were intoxicated			
Check if this claim is for a co	mmunity debt	Other. Specify			
		Other, Specify			
Is the claim subject to offset?					
₩ No					
Yes					
		aadda aan ee staddaanan wuxuu san too ahaa dhaadda ah yo oo oo oo oo dhaadaa ah oo	Photographic Committee of the Committee	NE CLE TOTAL SHIPPEN ASSESSMENT TO A CONTROL OF	e estat visualis i distribusiva e e e e e
Progressive medical association	ciates	Last 4 digits of account number 1 1 0 0	\$_1,320.00	\$	\$
Priority Creditor's Name					
1395 n hayden rd		When was the debt incurred?			
Number Street					
		As of the date you file, the claim is: Check all that apply.			
Scottsdale Az	85257	Contingent			
City State	ZIP Code	☐ Unliquidated			
		Disputed			
Who incurred the debt? Check on	<b>e</b> .	·			
☑ Debtor 1 only		Type of PRIORITY unsecured claim:			
Debtor 2 only		D. Domostic support obligations			
Debtor 1 and Debtor 2 only		<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
At least one of the debtors and ar	other	☐ Claims for death or personal injury while you were			
Check if this claim is for a co	mmunity debt	Claims for death or personal injury while you were intoxicated     Other. Specify			
Is the claim subject to offset?					
M No					
∏ ves					
<ul> <li>165</li> <li>2 substitute de la completa del completa del completa de la completa del la completa de la completa del la completa della comp</li></ul>	una eliptorent de son niva na tro satal augitore egan qui tro	THE CHIRD CHIRD CONTROL OF CONTROL OF CONTROL OF A PROSPER OF CONTROL OF CONT	a sagara andar Alinga a tra a dan da Alinga tenggi a aga ganggi daligi daligi manakang alin a ga pira a sa sa	Mind appeals of a series of the control of	managani i sebesa e, .
National credit system		Last 4 digits of account number 9 6 4 4	\$_3,775.00	\$_	\$
Priority Creditor's Name	<del></del>	aigire et account nambet			* *************************************
PO BOX 312125		When was the debt incurred?			
Number Street					
		As of the date you file, the claim is: Check all that apply.			
Atlanta Ga	31131	Contingent			
City State	ZIP Code	Unliquidated			
		Disputed			
Who incurred the debt? Check on	э.	<b>r</b>			
Debtor 1 only		Type of PRIORITY unsecured claim:			
Debtor 2 only					
Debtor 1 and Debtor 2 only		Domestic support obligations			
At least one of the debtors and an	other	Taxes and certain other debts you owe the government			
		☐ Claims for death or personal injury while you were intoxicated		OLDER CONTROL OF THE	AMAZON III I
Check if this claim is for a con	nmunity debt	Other. Specify		- morting on experiment of the foreign depending	out of the second secon
s the claim subject to offset?					
s the claim subject to oπset? ✓ No					

Debtor	4
Debioi	-1

Shanika Simole Saulsbeig

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

When was the debt Incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another  Claims for death or personal injury while you were intoxicated		and on the page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Non amo
When was the debt incurred?	כ	laza services	1 0 7 3	- 094.00		
At lanta	ΠÌ	iority Creditor's Name	Last 4 digits of account number 1 9 7 3	\$ 901.00	\$	<b>\$</b>
Adlanta GA 30328  Only State ZIP Code   Uniquidated   Disputed   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   Debtor 7 only   Debtor 7 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   Debtor 6 only   Debtor 7 only   Debtor 7 only   Debtor 8 only   Debtor 8 only   Debtor 8 only   Debtor 9 only	•	10 Hammond drive	When was the debt incurred?			
Atlanta GA 30328  State ZIP Code Unliquidated Disputed  Who Incurred the debt? Check one. Debtor 1 and Debtor 2 only Check If this claim is for a community debt  Who Incurred the debt?  Last 4 digits of account number Street  As of the date you file, the claim is: Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you were intoxicated Other Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check If this claim is for a community debt  If the claim subject to offset?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Other. Specify  Type of PRIORITY unsecured claim: Contingent Unliquidated Unliquidated Unliquidated Unliquidated Unliquidated Disputed  Type of PRIORITY unsecured claim:	u	mber Street				
Debtor 1 only	_		As of the date you file, the claim is: Check all that apply	<i>t</i> .		
Debtor 1 only	\ 1	tlanta GA 30328	Contingent			
Who incurred the debt? Check one.    Disputed   Dispute						
Type of PRIORITY unsecured claim:   Domestic support obligations   Taxes and certain other debts you owe the government   Claims for death or personal injury while you were intoxicated   Other. Specify   Domestic support obligations   Taxes and certain other debts you owe the government   Claims for death or personal injury while you were intoxicated   Other. Specify   Other Sp						
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unificated Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  When was the debt incurred claim: Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unfliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unfliquidated Disputed Claims for death or personal injury while you were intoxicated Other. Specify  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify  Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9	/1	ho incurred the debt? Check one.				
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?    As of the date you file, the claim is: Check all that apply.   Contingent     Debtor 1 only     Debtor 2 only     At least one of the debtors and another     Check if this claim is for a community debt     Check if this claim is for a community debt     Check if this claim is for a community debt     Check if this claim is for a community debt     Check if this claim is for a community debt     Debtor 1 only     Debtor 2 only     Debtor 2 only     Debtor 3 only     Debtor 4 only     Debtor 5 only     Debtor 5 only     Debtor 6 only     Debtor 1 only     Debtor 1 only     Debtor 2 only     Debtor 2 only     Debtor 3 only     Debtor 4 only     Debtor 4 only     Debtor 5 only     Yes     Taxes and certain other debts you owe the government claims for death or personal injury while you were intoxicated     Other. Specify     Other is personal injury while you were intoxicated     Debtor 1 only     Debtor 1 only     Debtor 1 only     Debtor 2 only     Debtor 3 only     Debtor 4 only     Debtor 5 only     Debtor 5 only     Debtor 6 only     Debtor 6 only     Debtor 6 only     Debtor 6 only     Debtor 1 only     Debtor 2 only     Debtor 2 only     Debtor 2 only     Debtor 3 only     Debtor 6 only     Debtor 6 only     Debtor 6 only     Debtor 6 only     Debtor 8 only     Debtor 9 only     Debtor 1 only     Debtor 2 only     Debtor 2 only     Debtor 2 only     Debtor 3 only     Debtor 6 only     Debtor 8 only     Debtor 9 only     Debtor 9 only     Debtor 9 only     Debtor 1 only     Debtor 1 only     Debtor 2 only			Type of PRIORITY unsecured claim:			
At least one of the debtors and another   Claims for death or personal injury while you were intoxicated intoxicated intoxicated   Other. Specify						
Claims for death or personal injury while you were intoxicated   Other. Specify			Domestic support obligations			
Check if this claim is for a community debt   intoxicated   Other. Specify	Ì	At least one of the debtors and another	Claims for death or necessal injury white any other			
Steet Claim subject to offset?    Other Specify	1	Check if this claim is for a community dobt	intoxicated			
the claim subject to offset?    No	-	oncok ir una claim is for a community dept				
No Yes    No   Yes   No   Yes   Name   Last 4 digits of account number   \$   S	1	the claim subject to offset?				
Last 4 digits of account number   S   S		· · · · · · · · · · · · · · · · · · ·				
Last 4 digits of account number   S   S						
When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Demestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated  Other. Specify  When was the debt Incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated  Claims for death or personal injury while you were intoxicated		The sufficient of the experimental control of the experime	CONTRACTOR STREET, STR			
when was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Last 4 digits of account number  Street  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Demestic support obligations Taxes and certain other debts you owe the government Chaims for death or personal injury while you were intoxicated Contingent Unliquidated Disputed  When was the debt Incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed			The state of the s	<ol> <li>An Ellip 1864-1875 vehicle in the Control of Control Substitute general con-</li> </ol>	ik Andrija's Atherineau efterensy "jewa <sub>16</sub> v. v.	11 / N. H. 1996 (1997)   1 / 1
As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated  Claims for death or personal injury while you were intoxicated	o	prity Creditor's Name	Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated  Claims for death or personal injury while you were intoxicated			Miles was the data to war to			
Contingent   Unliquidated   Disputed	n	nber Street	when was the debt incurred?			
Contingent   Unliquidated   Disputed			As of the date you file, the claim is: Check all that apply			
Unliquidated   Disputed			•			
Debtor 1 only	_					
Debtor 1 only	y	State ZIP Code				
Debtor 1 only   Type of PRIORITY unsecured claim:   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Taxes and certain other debts you owe the government   Claims for death or personal injury while you were intoxicated   Other. Specify   Other. Specif	h	o incurred the debt? Check one	☐ Disputed			
Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  No Yes  Last 4 digits of account number Street  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 only Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Claims for death or personal injury while you were intoxicated  Claims for death or personal injury while you were intoxicated			Type of DDIODITY uncommediately			
Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated  Other. Specify  Other. Specify  Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			Type of PRIORITY unsecured claim:			
As of the date you file, the claim is: Check all that apply.    Contingent   Check one.     Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated   Claims for death or personal injury while you were intoxicated						
Check if this claim is for a community debt  Claims for death or personal injury while you were intoxicated  Other. Specify  Other. Specify  Other. Specify  I No  I Yes  Claims for death or personal injury while you were intoxicated  Other. Specify  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt  Check if this claim is for a community debt		At least one of the debtors and another	Taxes and certain other debts you owe the government			
Other. Specify  Other. Specify			Claims for death or personal injury while you were			
the claim subject to offset?  No Yes  Last 4 digits of account number \$		Check if this claim is for a community debt				
As of the date you file, the claim is: Check all that apply.    Contingent   Unliquidated   Disputed		ha alaba auklinikk ee in	Other. Specify			
Yes   Last 4 digits of account number   \$						
Last 4 digits of account number \$						
Last 4 digits of account number \$		Yes  Miles and the second of promotion in the control of the contr	an makan salandan makata ( )	e vetalet- e iv		
When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed  Type of PRIORITY unsecured claim:  Claims for death or personal injury while you were intoxicated						TO COMMUNICATIONS
As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	or	rity Creditor's Name	Last 4 digits of account number	\$ \$	5	\$
As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated			When was the debt Income to			
Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	n	ber Street	when was the dept incurred?			
Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated			As of the date you file, the claim is: Check all that apply			
State ZIP Code Unliquidated Disputed  Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated			****			
ho incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	_					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated		State ZIP Code				
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	ıc	D incurred the debt? Check one	<b>□</b> Disputed			
Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			Type of PRIORITY upper constitution			
Debtor 1 and Debtor 2 only  At least one of the debtors and another  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			Type of PRIORITT Unsecured claim:			
At least one of the debtors and another  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated						
Claims for death or personal injury while you were intoxicated			Taxes and certain other debts you owe the government			
Check if this claim is for a community debt intoxicated intoxicated			Claims for death or personal injury while you were			
	(	Check if this claim is for a community debt	intoxicated	to the control of the second control of the control	n Philips Market to Established as all gre-	bank stellar och 2 espassi
			Other. Specify			
the claim subject to offset? No						

7	ebtor	- 1

Simone

Saulsberry

Case number (if known)

Middle Name

Part 2:	List	All of	Your	NONPRIORITY	Unsecured	Clain

3. Do any creditors have nonpriority unsecured claims against you?

onpriority unsecured claim, list the creditor separately for each	ical order of the creditor who holds each claim. If a creditor has claim. For each claim listed, identify what type of claim it is. Do not aim, list the other creditors in Part 3.If you have more than three nor	list claims alrea
		Total claim
	Last 4 digits of account number	¢
Nonpriority Creditor's Name	When was the debt incurred?	Ψ
Number Street		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
5.00		
Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	— Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
Charle 16 this claim is fan a assessment date	Obligations arising out of a separation agreement or divorce	
☐ Check if this claim is for a community debt	that you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
□ No	Other. Specify	
☐ Yes		
ti mentioneration in the executation of the execution of the environment of the execution o	Last 4 digits of account number	\$
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street		
order Country of the	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	T ANONORIOS INT.	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
□ No	Other. Specify	
Yes	FUCTORISETS IN LONGER VIV.	observation to the control of
	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	\$
Number Street		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one.	☐ Contingent	
	☐ Unliquidated	
☐ Debtor 1 only ☐ Debtor 2 only	☐ Disputed	
Debtor 2 only  Debtor 1 and Debtor 2 only		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
☐ Check If this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
is the claim subject to offset?	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
No No	Other. Specify	
☐ Yes		

De	btor	1

Simone Saulsberry

official Saulsber

Case number (if known)\_\_\_\_

Part 3:

## List Others to Be Notified About a Debt That You Aiready Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

On which entry in Part 1 or Part 2 did you list the original creditor?

Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Stre	et	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
******		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Hairie		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Stree	et	Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
The second second section of the section of the second section of the section	entre de la compression de la compressión del compressión de la co	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Stree	et	Part 2: Creditors with Nonpriority Unsecured
		Claims
0.1		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Stree	et .	Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
-		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Stree	et .	Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
	от в под постоя по постоя выбольно в под	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Stree		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	***	Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
Name	onne engagnin e i ni ku 1915 metat palatat i ku 18 meta kupatenakan i ni	On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Stree	et .	Part 2: Creditors with Nonpriority Unsecured Claims
		Look & digito of account number
City	State ZIP Code	Last 4 digits of account number

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

# Total claim

## **Total claims** from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 0.00

### Total claim

## **Total claims** from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6f.
- 6g.

	Shanika	Simone	Saulsberr	v 1	
Debtor	First Name	Middle N		<u>'</u>	
Debtor 2 (Spouse If filing	) First Name	Middle N	ame Last Name		
United States	Bankruptcy Court for	or the: Eastern D	istrict of Wisconsin		
Case number					
(If known)					eck if this is a ended filing
	-				J
Official I	Form 1060	G			
Sched	ule G: E	 xecutor	v Contracts a	nd Unexpired Leases	12/15
1. Do you! No. ( Yes.  List separate yample unexpire	have any execut Check this box an Fill in all of the in arately each pers r, rent, vehicle led d leases.	name and case  ory contracts of d file this form we formation below  son or company ase, cell phone	r unexpired leases?  with the court with your other and the contracts or lease, with whom you have the	chedules. You have nothing else to report on this form. Is are listed on Schedule A/B: Property (Official Form 106A/B). Is form in the instruction booklet for more examples of executory  State what the contract or lease is for	s for (for
Name	Street				
Name	Street	State Z	IP Code		
Name Number City	Street	State Z	IP Code		
Name Number City	Street	State Z	IP Code		
Name Number City2		State Z	IP Code		
Name Number City  Name Number	Street				
Name  Number  City  Name  Number  City			IP Code		
Name Number City Name Number City City					
Name  Number  City  Name  Number  City					
Name Number City Name Number City City					
Name  Number  City  Name  Number  City  City  Name  Number	Street	State Z			
Name  Number  City  Name  Number  City  Name  Number  City  City  City	Street	State Z	IP Code		
Name  Number  City  Name  Number  City  Name  Number  Number	Street	State Z	IP Code		
Name Number City Name Number City Name City City City City Number City City	Street	State Z	IP Code		
Name Number City 2.2 Name Number City 2.3 Name Number City 2.4 Name	Street	State Z	IP Code		

Name

Number

City

Street

State ZIP Code

D-64	4
Debtor	

2<u>2</u>

2.\_

2.\_

2.\_

2.\_

2.\_

2.\_

2.\_

Shanika

Street

Street

Street

Street

Street

Street

Street

Street

Simone

State

State

State

State

State

State

State

State

Saulsberry

Case number (if known)\_\_\_\_\_

Name

Number

City

Name

Number

irst Name Middle Name

# Additional Page If You Have More Contracts or Leases

### Person or company with whom you have the contract or lease W

ZIP Code

What the contract or lease is for	

City

Fill in				
	n this information to ide	entify your case:		
Debto	Shanika First Name	Simone Middle Name	Saulsberry Last Name	
Debto				_
	se, if filing) First Name	Middle Name	Last Name	
United	d States Bankruptcy Court fo	or the: Eastern District of	VVISCONSIN	
Case t	number own)			☐ Check if this is
				amended filing
Offic	cial Form 106	4		
	nedule H: Yo	<del></del>	ore .	40/45
				12/15 e. Be as complete and accurate as possible. If two married peo
2. <b>W</b>	rizona, California, Idaho, I No. Go to line 3. I Yes. Did your spouse, II No	Louisiana, Nevada, Ne former spouse, or legal	ew Mexico, Puerto Rico, Texas	ritory? (Community property states and territories include , Washington, and Wisconsin.)  time?  Fill in the name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equivale	int	
	Number Street			<del></del>
3 In	City	State State	ZIP Code	
sh So So	City  Column 1, list all of yo hown in line 2 again as	ur codebtors. Do not i a codebtor only if that n 106D), <i>Schedule E/F</i> l/e <i>G</i> to fill out Column	include your spouse as a co t person is a guarantor or co F (Official Form 106E/F), or S	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt
sh So So	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Forn chedule E/F, or Schedu	ur codebtors. Do not i a codebtor only if that n 106D), <i>Schedule E/F</i> l/e <i>G</i> to fill out Column	include your spouse as a co t person is a guarantor or co F (Official Form 106E/F), or S	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:
sh So So	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Forn chedule E/F, or Schedu	ur codebtors. Do not i a codebtor only if that n 106D), <i>Schedule E/F</i> l/e <i>G</i> to fill out Column	include your spouse as a co t person is a guarantor or co F (Official Form 106E/F), or S	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:
sh So So	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Fortichedule E/F, or Schedule Column 1: Your codebto	ur codebtors. Do not i a codebtor only if that n 106D), <i>Schedule E/F</i> l/e <i>G</i> to fill out Column	include your spouse as a co t person is a guarantor or co F (Official Form 106E/F), or S	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line
sh Sc Sc	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Forn chedule E/F, or Schedule Column 1: Your codebto	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F rie G to fill out Column or	include your spouse as a coot t person is a guarantor or co F (Official Form 106E/F), or S n 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
sh So So	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Fortichedule E/F, or Schedule Column 1: Your codebto	ur codebtors. Do not i a codebtor only if that n 106D), <i>Schedule E/F</i> l/e <i>G</i> to fill out Column	include your spouse as a coot t person is a guarantor or co F (Official Form 106E/F), or S n 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
sh Sc	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Forechedule E/F, or Schedule Column 1: Your codebto  Name  Number Street	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F rie G to fill out Column or	include your spouse as a coot t person is a guarantor or co F (Official Form 106E/F), or S n 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
sh Sc	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Forn chedule E/F, or Schedule Column 1: Your codebto	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F rie G to fill out Column or	include your spouse as a coot t person is a guarantor or co F (Official Form 106E/F), or S n 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line
sh Sc	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Forechedule E/F, or Schedule Column 1: Your codebto  Name  Number Street	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F rie G to fill out Column or	include your spouse as a coot t person is a guarantor or co F (Official Form 106E/F), or S n 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
sh Sc Sc C C C S.1	City  Column 1, list all of yo hown in line 2 again as chedule D (Official For chedule E/F, or Schedule Column 1: Your codebto  Name  Number Street  City	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F rie G to fill out Column or	include your spouse as a coot person is a guarantor or co F (Official Form 106E/F), or S a 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line
sh Sc Sc C C .1	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Fornchedule E/F, or Schedule Column 1: Your codebto  Name  Number Street  Number Street	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F t/e G to fill out Column or	include your spouse as a coot person is a guarantor or co F (Official Form 106E/F), or S a 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line
sh Sc	City  Column 1, list all of yo hown in line 2 again as chedule D (Official Fornchedule E/F, or Schedule Column 1: Your codebto  Name  Number Street  Number Street	ur codebtors. Do not i a codebtor only if that m 106D), Schedule E/F t/e G to fill out Column or	include your spouse as a coot person is a guarantor or co F (Official Form 106E/F), or S a 2.	debtor if your spouse is filing with you. List the person signer. Make sure you have listed the creditor on chedule G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line Schedule D, line Schedule G, line Schedule G, line

City

ZIP Code

State

Dehte	วร 1	

Simone

Saulsberry

Case number (	f known)

Deptoi

ame Middle Name Leet Nam

Additional Page	to List More	Codebtors
-----------------	--------------	-----------

Column 1:	Your codebtor			Column 2: The creditor to whom you owe the de
				Check all schedules that apply:
Name				Schedule D, line
1401110				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	<u> </u>
·				<b>D</b> • • • • •
Name	······································			Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	<u> </u>
Name	***************************************			Schedule D, line
				☐ Schedule E/F, line
Number	Street	**************************************		☐ Schedule G, line
City		State	ZIP Code	
				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
Oily		Jiale	Zir Gode	
Name		***************************************		Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	<u> </u>
Name				Schedule D, line
Manie				☐ Schedule E/F, line
Number	Street			Schedule G, line
City	<del>*************************************</del>	State	ZIP Code	
Name			***	Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	<u> </u>
Name				Schedule D, line
1401110				☐ Schedule E/F, line
Number	Street	<del></del>		Schedule G, line

Fill in this i	information to ide	entify your cas	e:					
Debtor 1	Shanika	Simone	Saulsberry					
Debtor 2	First Name	Middle N		Last Name		_		
(Spouse, if filing		Middle N		Last Name		-		
United States	Bankruptcy Court fo	or the: $\overline{E}$ (15 $+$ $C_{r}$	n District of <u>w</u>	sconsin				
Case number	r						Check if	this is:
(11 13 13 13 13 13 13 13 13 13 13 13 13 1			<del> </del>	<del></del>			🔲 An ar	mended filing
								oplement showing postpetition chapter 13 ne as of the following date:
Official F	orm 106I	<del></del>					MM /	DD / YYYY
Sche	dule I: Y	our In	come					12/15
supplying co	orrect information parated and your	n. If you are ma spouse is not on the top of a	irried and not fili filing with vou.	ng jointly, and ye do not include in	our sp forma	pouse is liv ation about	ing with	tor 2), both are equally responsible for you, include information about your spouse. ouse. If more space is needed, attach a known). Answer every question.
1. Fill in you informati	ur employment on.			Debtor 1				Debtor 2 or non-filing spouse
attach a s	re more than one j separate page with on about additional s.	- Employ	ment status	<ul><li> Employed</li><li> Not employ</li></ul>	/ed			Employed  Not employed
	art-time, seasonal, oyed work.		41	CBRF/ Care	niver			
	on may include stu naker, if it applies.	dent Occupa	tion					
		Employ	er's name	Capri Comm	unitie	es	<del></del>	
		Employ	er's address	20875 Cross	road	s Cir#400	)	
				Number Street				Number Street
					<del></del>		<del></del>	
				Waukesha		WI E		And the second s
				City	Stat		de	City State ZIP Code
		How Ion	g employed ther	e? 2months				2months
Part 2:	Give Details A	bout Monthly	/ Income					
Estimate	monthly income	as of the date	you file this form	. If you have noth	ing to	report for a	iny line, w	rite \$0 in the space. Include your non-filing
spouse un	iless you are sepa	rated. ise have more t	han one employer	r, combine the info				for that person on the lines
		,				For De	ebtor 1	For Debtor 2 or non-filing spouse
List mon deduction	thly gross wages	s, salary, and c	ommissions (bef	ore all payroll wage would be.	2.		2 217	non-ming spouse
	and list monthly		·	.g	3.	\$ +s	3,317 2000	\$ + \$
	_	. •						
4. Calculate	gross income. A	Add line 2 + line	3.		4.	\$	3,317	\$

Shanika First Name

Simone Middle Name

Saulsberry

Last Name

Case	number	lif know

		Fo	r Debtor 1	For Debtor 2 or non-filing spouse	-	
Copy line 4 here	. → 4.	\$_	3,717	\$		
5. List all payroll deductions:						
5a. Tax, Medicare, and Social Security deductions	5a.	\$	154.74	¢		
5b. Mandatory contributions for retirement plans	5a. 5b.	⊅_ \$	173.88		_	
5c. Voluntary contributions for retirement plans	5c.	-	170.00	-		
5d. Required repayments of retirement fund loans	5d.					
5e. Insurance	5e.					
5f. Domestic support obligations	5f.	Ψ_ \$		\$		
•		Ψ \$		\$		
5g. Union dues	5g.	Ψ				
5h. Other deductions. Specify:	5h.	+\$_		+ \$	_	
6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5l	h. 6.	\$	328.66	\$	_	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,388.96	\$	_	
8. List all other income regularly received:						
8a. Net income from rental property and from operating a business, profession, or farm						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	_	
8b. Interest and dividends	8b.	¢	0.00	\$		
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive		Ψ		Ψ	-	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	-	
8d. Unemployment compensation	8d.	\$	0.00	\$		
8e. Social Security	8e.	\$	0.00	\$	_	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistate that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ance 8f.	\$	0.00	\$		
8g. Pension or retirement income	-	•	0.00	_	-	
	8g.	\$	0.00	\$	-	
8h. Other monthly income. Specify:	_ 8h.	+\$		+\$		
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$		
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	3,388.96	+ \$	_	3,388.96
11. State all other regular contributions to the expenses that you list in Sche						
Include contributions from an unmarried partner, members of your household, friends or relatives.						
Do not include any amounts already included in lines 2-10 or amounts that are	e not av	ailable	to pay exper	nses listed in <i>Schedule J</i>	·	
Specify:					1. <b>+</b> \$	0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain					2. \$	3,388.96
13. Do you expect an increase or decrease within the year after you file this	form?				Combi monthi	ned ly income
☐ No. ☐ Yes. Explain:						
- 165. Explain.						

Fill in this information to identif	y your case:				
Debtor 1 Shanika Simor	ne Saulsberry	Check if th	is is		
Debtor 2	Middle Name Last Name			ling	
(Spouse, if filing) First Name	Middle Name Last Name			•	petition chapter 13
United States Bankruptcy Court for the	Eastern District of Wisconsin	expens	es as o	f the following	date:
Case number (If known)		MM / DE	)/ YYYY		
Official Form 106J					
Schedule J: Yo	ur Expenses				12/15
•	possible. If two married people are fili ded, attach another sheet to this form n.				
Part 1: Describe Your Ho	usehold				
1. Is this a joint case?					
☑ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a	separate household?				
☐ No ☐ Yes. Debtor 2 must f	ile Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.			
2. Do you have dependents?	□ No	Dependent's relationship to		Dependent's	Door dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	-	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	casi asperiasin	Dughter		18	☐ No ☑ Yes
		busghter		15	No No
		J.			<b>⊠</b> Yes DINo
					U No □ Yes
					☐ No
		· · · · · · · · · · · · · · · · · · ·			☐ Yes
					□ No
					Yes
<ol> <li>Do your expenses include expenses of people other than yourself and your dependents?</li> </ol>	☑ No □ Yes				
Part 2: Estimate Your Ongo	oing Monthly Expenses				
	ir bankruptcy filing date unless you a	re using this form as a suppler	nent in	a Chapter 13 c	ase to report
	nkruptcy is filed. If this is a supplem			-	•
	n-cash government assistance if you			<b>V</b>	
	ed it on Schedule I: Your Income (Offi	,		Your expe	nses
any rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and	4.	\$	900.00
If not included in line 4:					
4a. Real estate taxes			4a.	\$	
4b. Property, homeowner's, or			4b.	_	
4c. Home maintenance, repair	, ,		4c.	\$	
4d Homeowner's association (	or condominium dues		4d	<b>c</b>	

Official Form 106J

Debtor 1

Shanika Simone Saulsberry

Case number (# known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$250.00
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$150.00
	6d. Other, Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$ 600.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$120.00
11.	Medical and dental expenses	11.	\$
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$50.00
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Page 38 of 57

Debtor 1 Shanika Simone Saulsberry Case number (# known)\_\_\_\_\_

21.	Other. Specify:	21.	+\$	
22.	Calculate your monthly expenses.			
	22a. Add lines 4 through 21.	22a.	\$	1620.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$	1620.00
23. <b>C</b>	Calculate your monthly net income.			3738.96
2	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3736.90
2	3b. Copy your monthly expenses from line 22c above.	<b>23b</b> .	-\$	1620
2	3c. Subtract your monthly expenses from your monthly income.			1719.00

## 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☑ No.

☐ Yes. Explain here:

The result is your monthly net income.

Fill in this in	nformation to ide	entify your case:			
Debtor 1	Shanika	Simone	Saulsberry		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing		Middle Name	Last Name		
United States	Bankruptcy Court fo	or the: Eastern District of	Wisconsin	1	
Case number (If known)					
7.41. · · · · · · · · · · · · · · · · · · ·					Check if this is ar amended filing
If two marr You must f obtaining r	ied people are fi ile this form who noney or proper	iling together, both are	equally responsible for ptcy schedules or amen- ion with a hankruptcy ca	Debtor's Schedules supplying correct information.  ded schedules. Making a false statement, concise can result in fines up to \$250,000, or impris	ealing property, or conment for up to 20
₩ No		pay someone who is N	IOT an attorney to help y	you fill out bankruptcy forms?	
<b>—</b> 103.	Name of person_			Attach Bankruptcy Petition Preparer's Notice, Decl. Signature (Official Form 119).	aration, and
Signature	enalty of perjury are true and co	, I declare that I have no rect.	Signature of Debi	chedules filed with this declaration and	
MM MM	/ DD / YYYY	<u> </u>	Date MM / DD /	YYYY	

Autor 2  Spoons, if filing) Past Name  Spoons, if filing) Past Name  Last Nam	ebtor 1	Shanika	Simone	Saulsberry	,	
The distance Bankuptcy Court for the: Eastern District of Wisconsin amenumber and States Bankuptcy Court for the: Eastern District of Wisconsin amenumber and states Bankuptcy Court for the: Eastern District of Wisconsin amenumber and states Bankuptcy Court for the: Eastern District of Wisconsin amenumber and states and securate as possible. If two married people are filing together, both are equally responsible for supplying correct symation. If more space is needed, state is separate sheet to this form. On the top of any additional pages, write your name and case before the possible of the possible		First Name	Middle Name	Last Name		
Check if this is amended filing		ing) First Name	Middle Name	Last Name	5-0-1-8-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1	
Acheck if this is amended filing  ficial Form 107  atement of Financial Affairs for Individuals Filing for Bankruptcy  as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct mation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case believe (if known). Answer every question.  It is give Details About Your Marital Status and Where You Lived Before  What is your current marital status?    Married   Not married	ited State	es Bankruptcy Court fo	or the: Eastern Distric	ct of Wisconsin		
Attement of Financial Affairs for Individuals Filing for Bankruptcy attement of Financial Affairs for Individuals Filing for Bankruptcy attement of Financial Affairs for Individuals Filing for Bankruptcy attemation. It more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet is the separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.  The separate sheet to this form. On the top of any additional pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the pages, write your name and case other to the your		er		··········		☐ Check if this is a
atement of Financial Affairs for Individuals Filing for Bankruptcy  so complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct mation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case beer (if known). Answer every question.  It is give Details About Your Marital Status and Where You Lived Before  What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1  Inved there  Same as Debtor 1  Same a			············			amended filing
at complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct matton. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.    Give Details About Your Marital Status and Where You Lived Before						
as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct rmation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case other (if known). Answer every question.    Answer every question.			_	#-! # !!!		
marticin. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case mber (if known). Answer every question.  Give Details About Your Marital Status and Where You Lived Before  What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1  Bates Debtor 1  Ilived there  Same as Debtor 1  Same as Debtor 1  Number Street  Nilwaukee  Wil 53222  City  State ZiP Code  Same as Debtor 1  Same as Debt	tater	ment of Fi	nancial Af	tairs for Indiv	riduals Filing for Bai	nkruptcy 04/
### Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?						
What is your current marital status?  ☐ Married ☐ Not married ☐ No ☐ Yes. List all of the places you lived anywhere other than where you live now? ☐ No ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ☐ Debtor 1: ☐ Dates Debtor 1 ☐ Dates Debtor 2:		•	•	separate sneet to this for	m. On the top of any additional page	s, write your name and case
What is your current marital status?  ☐ Married  ☑ Not married  ☐ No ☐ Ves. List all of the places you lived anywhere other than where you live now? ☐ No ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. ☐ Dates Debtor 1: ☐ Dates Debtor 2: ☐ Ilived there ☐ Same as Debtor 1: ☐ Sa		,				
During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1:  Debtor 2:  Ilived there  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 1:  Milwaukee  WI 53222  City  State ZIP Code  Same as Debtor 1:  Same as Debtor 1:  City  State ZIP Code  Same as Debtor 1:  Same as Debtor 3:  Invented  From 4/2018  To 3/2019  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 3:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Same as Debtor 1:  Same as Debtor 2:  Same as Debtor 1:  Sam	art 1:	Give Details At	bout Your Marita	l Status and Where Y	ou Lived Before	
Married  During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1   Debtor 2:   Dates Debtor 2   lived there    Same as Debtor 3   Same as Debtor 1   Same as Debtor 1   Same as Debtor 1   Same as Debtor 2   Same as Debtor 3    Number Street   State ZiP Code    Millwaukee   WI   53222   State ZiP Code   Same as Debtor 1   Same as Debtor 3    Millwaukee   WI   53222   State ZiP Code   Same as Debtor 1   Same as Debtor 2   Same as Debtor 3   Same as Debtor 3   Same as Debtor 4   Same as Debtor 3   Same as Debtor 4   Same as Debtor 5   Same as Debtor 5   Same as Debtor 6   Same as Debtor 7   Same as Debtor 6   Same as Debtor 7   Same as Debtor 8   Same as Debtor 9   Same as Debtor 9   Same as Debtor 9   Same as Debtor 1   Same as Debtor 9   Same as Debtor 9   Same as Debtor 1   Same as Debtor 9   Same as Debtor 9   Same as Debtor 9   Same as Debtor 1   Same as Debtor 9   Same as D		- · · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·
During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1:  Dates Debtor 1   Debtor 2:   Dates Debtor 2   Debtor 2:   Dates Debtor 3   Debtor 3			rital status?			
During the last 3 years, have you lived anywhere other than where you live now?    No   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1:						
Ves. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1:	W NOT	t marned				
Same as Debtor 1   Same as De	□ No			-		
Same as Debtor 1   Same as Deb	☐ No ☐ Yes	s. List all of the plac		ast 3 years. Do not include  Dates Debtor 1	e where you live now.	Dates Debtor 2 lived there
Milwaukee WI 53222 City State ZIP Code  City State ZIP Code  Same as Debtor 1  Same as Debtor 1  Same as Debtor 1  Grande AZ 85122 City State ZIP Code  City State ZIP Code  City State ZIP Code  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	☐ No ☑ Yes	s. List all of the plac		ast 3 years. Do not include  Dates Debtor 1	e where you live now.  Debtor 2:	lived there
Milwaukee WI 53222 City State ZIP Code  City State ZIP Code  Same as Debtor 1  Same as Debtor 1  Same as Debtor 1  From 11/2016 To 08/2018  Grande AZ 85122 City State ZIP Code  City State ZIP Code  From	No Yes	s. List all of the plac	ces you lived in the la	ast 3 years. Do not include  Dates Debtor 1  lived there	e where you live now.  Debtor 2:	lived there
City State ZIP Code  City State ZIP Code  Same as Debtor 1  Same as Debtor 1  Same as Debtor 1  Same as Debtor 1  From 11/2016 To 08/2018  From 08/2018  City State ZIP Code  From	No Yes	s. List all of the place lebtor 1: 5220 W lovers I	ces you lived in the la	Dates Debtor 1 lived there	e where you live now.  Debtor 2:  Same as Debtor 1	lived there  Same as Debtor  From
Same as Debtor 1    Same as Debtor 1   Same as Debtor 2   Same as Debtor 1   Same as Debtor 2   Same as Debt	No Yes	s. List all of the place lebtor 1: 5220 W lovers I	ces you lived in the la	Dates Debtor 1 lived there	e where you live now.  Debtor 2:  Same as Debtor 1	lived there  Same as Debtor  From
351 N Pear Rd, Casa    From 11/2016   Number   Street   To 08/2018   Number   Street   To	No Yes	s. List all of the place lebtor 1: 5220 W lovers I	es you lived in the la	Dates Debtor 1 lived there  From 8/2018 To 3/2019	e where you live now.  Debtor 2:  Same as Debtor 1	lived there  Same as Debtor  From
Number Street  To 08/2018  Number Street  To 08/	No Yes	s. List all of the place sebtor 1:  5220 W lovers Inventor Street Milwaukee	ane Rd WI 5322	Dates Debtor 1 lived there  From 8/2018 To 3/2019	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street	lived there  Same as Debtor  From  To
Number Street  To 08/2018  Number Street  To 08/2018  To 08/2018  To 08/2018  Number Street  To 08/2018  To 08/2018  To 08/2018  City State ZIP Code  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	No Yes	s. List all of the place sebtor 1:  5220 W lovers Inventor Street Milwaukee	ane Rd WI 5322	Dates Debtor 1 lived there  From 8/2018 To 3/2019	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State	Iived there  Same as Debtor  From  To  ZIP Code
Grande AZ 85122 City State ZIP Code City State ZIP Code City State ZIP Code  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No	No Yes De	s. List all of the place sebtor 1:  5220 W lovers Instruction Street  Milwaukee  City	ane Rd  WI 5322 State ZIP Cod	Dates Debtor 1 lived there  From 8/2018 To 3/2019	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State	Iived there  Same as Debtor  From  To  ZIP Code  Same as Debtor
City State ZIP Code  City State ZIP Code  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	No Yes De S	s. List all of the place lebtor 1:  5220 W lovers In Number Street  Milwaukee  City  851 N Pear Rd,	ane Rd  WI 5322 State ZIP Cod	Prom 1/2016	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	Iived there  Same as Debtor  From  To  ZIP Code  Same as Debtor  From
Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No	No Yes De S	s. List all of the place lebtor 1:  5220 W lovers In Number Street  Milwaukee  City  851 N Pear Rd,	ane Rd  WI 5322 State ZIP Cod	Prom 1/2016	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	Iived there  Same as Debtor  From  To  ZIP Code  Same as Debtor  From
states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	No Yes	s. List all of the place  sebtor 1:  5220 W lovers I  Number Street  Milwaukee  City  851 N Pear Rd,	ane Rd  WI 5322 State ZIP Coo	Prom 1/2016 To 08/2018	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	Iived there  Same as Debtor  From  To  ZIP Code  Same as Debtor  From
states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	No Yes Yes D	s. List all of the place sebtor 1:  5220 W lovers I Number Street  Milwaukee City  851 N Pear Rd, Number Street	ane Rd  WI 5322 State ZIP Coo	Prom 11/2016 To 08/2018	Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1  Number Street	Iived there  Same as Debtor  From  To  ZIP Code  Same as Debtor  From  To  To
☑ No	No Poi	s. List all of the place lebtor 1:  5220 W lovers I  Street  Milwaukee  City  Street  Street  Grande	ane Rd  WI 5322 State ZIP Cod  Casa  AZ 8512 State ZIP Cod	Prom 8/2018 To 3/2019  From 1/2016 To 08/2018	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Number Street  City State	Iived there  Same as Debtor From To  ZIP Code  ZIP Code  ZIP Code
Yes Make sure you fill out Schedule H: Your Codebtors (Official Form 106H)	No Ver Yes	s. List all of the place  sebtor 1:  5220 W lovers I  Street  Milwaukee  City  Street  Grande  City  the last 8 years, di	ane Rd  WI 5322 State ZIP Cod  Casa  AZ 8512 State ZIP Cod  id you ever live with	Prom 8/2018 To 3/2019  From 11/2016 To 08/2018  To 08/2018	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Number Street  City State	Iived there  Same as Debtor From To  ZIP Code  From To  ZIP Code  ZIP Code  From To
- 1 301 mand sale you mit out controlate 11. Your conceptors (children to the 1001).	No Very Yes Do	s. List all of the place  sebtor 1:  5220 W lovers I  Street  Milwaukee  City  Street  Grande  City  the last 8 years, di	ane Rd  WI 5322 State ZIP Cod  Casa  AZ 8512 State ZIP Cod  id you ever live with	Prom 8/2018 To 3/2019  From 11/2016 To 08/2018  To 08/2018	e where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Number Street  City State	Ilived there  Same as Debtor From To  ZIP Code  From To  ZIP Code  ZIP Code  From To

F	Did you have any income from employmer fill in the total amount of income you received f you are filing a joint case and you have inco	d from all jobs and all busi	nesses, including part-tir	me activities.	endar years?
_	☑ No ☑ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
	the date you filed for bankruptcy:	Operating a business		Operating a business	<del>V</del>
	For last calendar year:	Wages, commissions, bonuses, tips	Φ.	Wages, commissions, bonuses, tips	
	(January 1 to December 31,)	Operating a business	Φ	Operating a business	<b>\$</b>
	For the calendar year before that:	Wages, commissions,		☐ Wages, commissions,	
	(January 1 to December 31,)	bonuses, tips  Operating a business	\$	bonuses, tips  Operating a business	\$
u g	nclude income regardless of whether that incontemployment, and other public benefit paymambling and lottery winnings. If you are filing	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	ome; interest; dividends; income that you receive	money collected from law ed together, list it only onc	suits; royalties; and
u g	nemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alim ome; interest; dividends; income that you receive	money collected from law ed together, list it only onc	suits; royalties; and
g L	nemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alim ome; interest; dividends; income that you receive	money collected from law ed together, list it only onc	suits; royalties; and
g L	nemployment, and other public benefit paym ambling and lottery winnings. If you are filing ist each source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do	of other income are alim ome; interest; dividends; income that you receive	money collected from law ed together, list it only onc t you listed in line 4.	suits; royalties; and
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e  No Yes. Fill in the details.  From January 1 of current year until	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income  Describe below.	of other income are alimer; interest; dividends; income that you receive to not include income that  Gross income from each source (before deductions and exclusions)	money collected from law- ed together, list it only onc t you listed in line 4.  Debtor 2  Sources of Income Describe below.	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and exclusions)
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e  No Yes. Fill in the details.	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income  Describe below.	of other income are alimate; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)	money collected from law- ed together, list it only onc t you listed in line 4.  Debtor 2  Sources of income	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and exclusions)
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e  No Yes. Fill in the details.  From January 1 of current year until	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income  Describe below.	of other income are alimate; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)	money collected from law- ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and exclusions)
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income  Describe below.	of other income are alimer; interest; dividends; income that you receive to not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from law- ed together, list it only onc t you listed in line 4.  Debtor 2  Sources of income Describe below.	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and exclusions)  - \$ \$ \$ \$ \$
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e  No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income  Describe below.	of other income are alimine; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from law- ed together, list it only once t you listed in line 4.  Debtor 2  Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)  - \$
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income  Describe below.	of other income are alimine; interest; dividends; income that you receive not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from law- ed together, list it only onc t you listed in line 4.  Debtor 2  Sources of income Describe below.	suits; royalties; and e under Debtor 1.  Gross income from each source (before deductions and exclusions)  - \$ - \$ - \$ - \$ - \$
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from e No  Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,)	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income Describe below.	of other income are alimer; interest; dividends; income that you receive to not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from law- ed together, list it only onc t you listed in line 4.  Debtor 2  Sources of income Describe below.	suits; royalties; and e under Debtor 1.  Gross Income from each source (before deductions and exclusions)  - \$ - \$ - \$ - \$ - \$ - \$
g L	nemployment, and other public benefit paymambling and lottery winnings. If you are filing ist each source and the gross income from each No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. Do  Debtor 1  Sources of income Describe below.	of other income are alimer; interest; dividends; income that you receive to not include income that  Gross income from each source (before deductions and exclusions)  \$	money collected from law- ed together, list it only once t you listed in line 4.  Debtor 2  Sources of Income Describe below.	Gross income from each source (before deductions and exclusions)  - \$

Debtor 1

Shanika

Simone

Saulsberry

Case number (# known)\_\_\_\_\_

Part 3.

List Certain Payments You Made Before You Filed for Bankruptcy

	ther Debtor 1's or Debtor 2's debts primarily								
U No	No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
	During the 90 days before you filed for bank	ruptcy, did you p	ay any creditor a total o	f \$6,825* or more?					
	No. Go to line 7.								
	Yes. List below each creditor to whom yo total amount you paid that creditor. child support and alimony. Also, do	Do not include p	payments for domestic si	upport obligations, such as					
	* Subject to adjustment on 4/01/22 and even		•	• •					
Ø Ye	es. Debtor 1 or Debtor 2 or both have primari	ly consumer de	ahte						
	During the 90 days before you filed for bankr			\$600 or more?					
	☑ No. Go to line 7.	apioy, ala you p	ay any oroanor a total of	4000 of more:					
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payment.	or domestic supp	oort obligations, such as	child support and					
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for				
	Creditor's Name		\$	\$	☐ Mortgage				
	Creditor's Name				☐ Car				
	Number Street				Credit card				
					Loan repayment				
	N 100 - 100	-			Suppliers or vendor				
	City State ZIP Code				Suppliers or vendor  Other				
	City State ZIP Code	-			☐ Suppliers or vendor				
	City State ZIP Code		\$	<b>¢</b>	Other				
	City State ZIP Code  Creditor's Name		\$	\$	Other				
			\$	\$	Other				
			\$	\$	Other Mortgage Car Credit card				
	Creditor's Name		\$	\$	Other Mortgage Car Credit card Loan repayment				
	Creditor's Name		\$	\$	☐ Other Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor				
	Creditor's Name		\$	\$	Other Mortgage Car Credit card Loan repayment				
	Creditor's Name  Number Street		\$	\$	Other Mortgage Car Credit card Loan repayment Suppliers or vendor				
	Creditor's Name  Number Street  City State ZIP Code		\$\$	\$\$ \$	☐ Other Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor				
	Creditor's Name  Number Street		7	*	☐ Other Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other				
	Creditor's Name  Number Street  City State ZIP Code		7	*	Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other				
	Creditor's Name  Number Street  City State ZIP Code  Creditor's Name		7	*	☐ Other ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car ☐ Credit card				
	Creditor's Name  Number Street  City State ZIP Code  Creditor's Name		7	*	Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other				

Debtor 1	Shanika First Name M	Simone Iddle Name Last Name	Saulsberry		Case number (# known)	
Insid corp ager such <b>⊻</b>	ders include your rela orations of which yo nt, including one for n as child support an	a business you operate as a d alimony.	relatives of any g son in control, or	eneral partners; powner of 20% or	partnerships of whic more of their voting	
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			\$	_ \$	
	Number Street					
	City	State ZIP Code	-	\$	\$	
	Insider's Name			Ψ	Ψ	
	Number Street					
	City	State ZIP Code	-			
an ir	nsider?	u filed for bankruptcy, did yots guaranteed or cosigned b		ayments or trans	fer any property o	n account of a debt that benefited
□ / ☑ '		s that benefited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name			\$	\$	
	Number Street					
	City	State ZIP Code	-			
	Insider's Name		-	\$	\$	
	Number Street		- <del>10.1</del>			

City

State

ZIP Code

Debtor 1

Shanika	Simone	Saulsberry	Case number (if known)	
First Name	Middle Name La	ast Name		
4: Identify L	ngal Actions Bons	econions and Foreston.		
		ssessions, and Foreclosu	lawsuit, court action, or administrative	proceeding?
			divorces, collection suits, paternity actions	_
contract dispute	s.		, ,	
No				
Yes. Fill in the de	etails.			
		Nature of the case	Court or agency	Status of the c
				-
Case title		_	Court Name	Pending
				On appeal
			Number Street	☐ Concluded
Case number		<u>_</u> ·		
			City State ZIP Cod	e
Case title			Court Name	Pending
				On appeal
		<del></del>	Number Street	Concluded
Case number				
		<del>-</del>	City State ZIP Cod	

V	No.	Go to line 11.	

	Yes	Fill	in	the	information	helow
_	103.		31 1	uic	milliauon	DCION

		Describe the property	Date	Value of the property
Creditor's Name		 	MAN TO SERVICE	\$
Number Street		Explain what happened		
City	State ZIP Code	Property was repossessed.  Property was foreclosed.  Property was garnished.  Property was attached, seized, or levied.		
		Describe the property	Date	Value of the property
Creditor's Name		_	<del>a da da</del>	\$
Number Street		Explain what happened		
		Property was repossessed.  Property was foreclosed.		

Official Form 107

City

State ZIP Code

Property was garnished.

☐ Property was attached, seized, or levied.

	Shanika First Name Mi	Simone Last	Saulsberry	Case number (# known)_	<del>- 4</del>	
ithi	in 90 days before y	you filed for bankru	ptcy, did any creditor, including cause you owed a debt?	a bank or financial institut	tion, set off any a	mounts from you
ĺΝ		nake a payment bet	cause you owed a debt!			
	es. Fill in the detail:	s.				
			Describe the action the creditor t	rack.	Date action	Amount
_	·				was taken	Amount
Cı	reditor's Name					
N	umber Street		<b></b>		Here we have the second	\$
_			•			
Ci	ty	State ZIP Code	Last 4 digits of account number	: XXXX–		
			<b>G</b>			
/ithi	n 1 year before yo	u filed for bankrupt	cy, was any of your property in	the possession of an assig	nee for the benef	it of
	parties.	inted receiver, a cu	stodian, or another official?			
N	-					
) Y	es					
5:	List Certain G	ifts and Contribu	itions			
<u> </u>	2.51 00.14		NOTE			
		<b></b>	4		600	
ithii	n / vaare natora v	au filed far hankrun	TCV GIG VALLGIVA SOV GIFFE WITH 9	total valua of more than C		
		ou filed for bankrup	tcy, did you give any gifts with a	total value of more than \$	ouu per person r	
<b>1</b> N	o		tcy, did you give any gifts with a	total value of more than \$	ouu per person r	
Ž N			tcy, did you give any gifts with a	total value of more than \$	ouu per person r	
<b>1</b> N	o es. Fill in the details		tcy, did you give any gifts with a	total value of more than \$	Dates you gave the gifts	Value
<b>1</b> N	o es. Fill in the details Gifts with a total valu	s for each gift.		total value of more than \$	Dates you gave	Value
NA D	o es. Fill in the details Gifts with a total valu per person	s for each gift.		total value of more than \$	Dates you gave	Value \$
NA D	o es. Fill in the details Gifts with a total valu	s for each gift.		total value of more than \$	Dates you gave	
NA P	o es. Fill in the details Gifts with a total valu per person	s for each gift.		total value of more than \$	Dates you gave	
Your Pee	O es. Fill in the details Gifts with a total valu per person  rson to Whom You Gave	s for each gift.		total value of more than \$	Dates you gave	\$
You Pee	o es. Fill in the details Gifts with a total valu per person	s for each gift.		total value of more than \$	Dates you gave	\$
You Pee	O es. Fill in the details Gifts with a total valu per person  proon to Whom You Gave	s for each gift.		total value of more than \$	Dates you gave	\$
Pe Nu	O es. Fill in the details Gifts with a total valu per person  proon to Whom You Gave	s for each gift.  se of more than \$600  the Gift  State ZIP Code	Describe the glfts	total value of more than \$	Dates you gave	\$
Pe Nu	O es. Fill in the details Gifts with a total valu per person  proon to Whom You Gave	s for each gift.  e of more than \$600  the Gift	Describe the glfts	total value of more than \$	Dates you gave	\$
Pe Nu Pe	es. Fill in the details  Gifts with a total valu per person  erson to Whom You Gave  mber Street	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$ \$
Pe Git	O es. Fill in the details Gifts with a total valu per person  proon to Whom You Gave	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you	Describe the glfts	total value of more than \$	Dates you gave	\$
Pe GH	oes. Fill in the details  Gifts with a total value per person  From to Whom You Gave  From Street  From Stree	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$ \$
Pe Git pe	es. Fill in the details  Gifts with a total value per person  First Whom You Gave  First Street  First With a total value First With a total value First Person	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$ \$
Pe Git pe	oes. Fill in the details  Gifts with a total value per person  From to Whom You Gave  From Street  From Stree	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$\$ \$
Pe Git pe	es. Fill in the details  Gifts with a total value per person  First Whom You Gave  First Street  First With a total value First With a total value First Person	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$\$ \$
Pe Git pe	es. Fill in the details  Gifts with a total value per person  First Whom You Gave  First Street  First With a total value First With a total value First Person	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$\$ \$
Pe Pe	es. Fill in the details  Gifts with a total value per person  First Whom You Gave  First Street  First With a total value First With a total value First Person	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$\$ \$
Pe Pe	es. Fill in the details  Gifts with a total value per person  From to Whom You Gave  Person's relationship to  fts with a total value person  From to Whom You Gave	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$\$ \$
Pe Pe	es. Fill in the details  Gifts with a total value  person  person to Whom You Gave  person's relationship to  fts with a total value  person to Whom You Gave  mber Street	s for each gift.  se of more than \$600  the Gift  State ZIP Code  you  of more than \$600	Describe the glfts	total value of more than \$	Dates you gave the gifts	\$\$ \$

btor 1	Shanika First Name	Simone Las	Saulsberry	Case number (# ĸnown)	
. With	nin 2 years before	you filed for bankru	ptcy, did you give any gifts or contrib	utions with a total value of more thar	s \$600 to any charity?
Ø		ails for each gift or cor	. Author (Airean		
	Yes. Fill in the det	alls for each glit or cor	itribution.		
	Gifts or contributi that total more tha		Describe what you contributed	Date you contributed	Value
	Charity's Name		-		\$
			-		\$
	Number Street		-		
	City State	ZIP Code	-		
art 6	List Certal	n Losses			
		··· · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
	hin 1 year before aster, or gambling		tcy or since you filed for bankruptcy,	did you lose anything because of the	eft, fire, other
		g r			
	No Yes. Fill in the det	oile			
_	res. Fill in the det	alis.			
	Describe the prop		Describe any insurance coverage for the		Value of property
	how the loss occu	irrea	Include the amount that insurance has pa claims on line 33 of Schedule A/B: Proper		lost
					\$
rt 7	List Certain	Payments or Trar	isfers		
Witi you	hin 1 year before consulted about	you filed for bankrup seeking bankruptcy	tcy, did you or anyone else acting on or preparing a bankruptcy petition? eparers, or credit counseling agencies fo		
	No Yes. Fill in the deta	ails.			
	Person Who Was Paid		Description and value of any property t	transferred Date payment transfer was made	or Amount of payment
	Number Street				\$
				<del></del>	\$
	City	State ZIP Code			
	Email or website addre	988			
	Person Who Made the	Payment, if Not You			

otor 1	Shanika	Simone	Saulsberry	Case number (if known)		
	First Name M	fiddle Name Last	Name	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	MEN AND IN A MARKET OF THE PARTY OF THE BANGE COMMANDER WITH THE CO.					
			Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street	W				\$
						\$
	City	State ZIP Code				
	Email or website address	)	-			
	Person Who Made the P	ayment, if Not You				
pror	nised to help you o	ou filed for bankrupt deal with your credit nent or transfer that y	cy, did you or anyone else acting of fors or to make payments to your of ou listed on line 16.	on your behalf pay or tran reditors?	sfer any property to	anyone who
<b>1</b>		<b>-</b>				
<b>1</b>	es. Fill in the detail	S.				
			Description and value of any proper	ty transferred	Date payment or transfer was made	Amount of payr
	Person Who Was Paid	****			maue	
	Number Street	www				\$
					····	\$
	City	State ZIP Code				
Inclu Do n	de both outright trai ot include gifts and	nsfers and transfers n transfers that you hav	business or financial affairs?  nade as security (such as the granting  re already listed on this statement.  Description and value of property  transferred	g of a security interest or m  Describe any property or debts paid in exchar	or pavments received	perty).  Date transfe was made
	Person Who Received Tr	ansfer	a ansierred	or debts paid in excitar	ige	was made
	Number Street					***
	Number Street					
	City	State ZIP Code				
	Person's relationship t	o you				
	Person Who Received Tra					
_		21 (31 JI				
	Number Street					
	City Boroon's relationship t	State ZIP Code				
- 1	erson s relationship to	o you				

	Snanika First Name Middle Nam	Simone Te Last N	Saulsberry	Case number (# kr	own)	
	rnst warne - miggie hain	ie Lastr	iame			
	hin 10 years before you fi : a beneficiary? (These are		ptcy, did you transfer any proper set-protection devices.)	rty to a self-settled tru	st or similar device of v	vhich you
	No	y orton banda ac	out protoution devices,			
	Yes. Fill in the details.					
			Description and value of the prope	erty transferred		Date transfer was made
						was made
	Name of trust					
	List Certain Financ		, Instruments, Safe Deposit	Royae and Stores	a IInite	la all'illiant della
		<del></del>				
	nin 1 year betore you tiled sed, sold, moved, or trans		cy, were any financial accounts o	or instruments held in	your name, or for your	benefit,
			or other financial accounts; cert	ificates of denosit: sh	ares in hanks credit un	ions
oro	kerage houses, pension f	iunds, coopera	tives, associations, and other fi	nancial institutions.	ures in bullins, credit un	iiotia,
Ą	No					
]	Yes. Fill in the details.					
			Last 4 digits of account number	Type of account or	Date account was	Last balance befo
				instrument	closed, sold, moved, or transferred	closing or transfe
	Name of Financial Institution	<del></del>	XXXX-	☐ Checking		
			^^^	Savings	**************************************	3
	Number Street			Money market		
				Brokerage		
	City State	ZIP Code		Other		
				G Other		
			XXXX-	☐ Checking		•
	Name of Financial Institution			-		· · · · · · · · · · · · · · · · · · ·
				☐ Savings		
	Name of Financial Institution  Number Street			Savings  Money market		Y
				Savings Money market Brokerage		· · · · · · · · · · · · · · · · · · ·
		ZIP Code		Savings  Money market		-
Do s	Number Street  City State			Savings  Money market  Brokerage  Other		
Do j	Number Street  City State	have within 1 y	year before you filed for bankrup	Savings  Money market  Brokerage  Other	box or other depository	<i>t</i> for
ec Z	Number Street  City State you now have, or did you urities, cash, or other value	have within 1 y		Savings  Money market  Brokerage  Other	box or other depository	for
Sec 1	Number Street  City State you now have, or did you urities, cash, or other value	have within 1 y		Savings  Money market  Brokerage  Other	box or other depository	<i>t</i> for
sec V	Number Street  City State you now have, or did you urities, cash, or other valu	have within 1 y		Savings  Money market  Brokerage  Other		o for  Do you still have it?
sec V	Number Street  City State you now have, or did you urities, cash, or other valu	have within 1 y	year before you filed for bankrup	Savings  Money market Brokerage Other		Do you sti have it?
sec V	Number Street  City State you now have, or did you urities, cash, or other valu	have within 1 y	year before you filed for bankrup Who else had access to it?	Savings  Money market Brokerage Other		Do you sti
sec M I	Number Street  City State  you now have, or did you urities, cash, or other valu  No  Yes. Fill in the details.	have within 1 y	year before you filed for bankrup	Savings  Money market Brokerage Other		Do you stil have it?
sec M I	Number Street  City State  you now have, or did you urities, cash, or other valu  No  Yes. Fill in the details.	have within 1 y	year before you filed for bankrup Who else had access to it?	Savings  Money market Brokerage Other		Do you stil have it?
sec V	Number Street  City State you now have, or did you urities, cash, or other valu No Yes. Fill in the details.	have within 1 y	year before you filed for bankrup Who else had access to it?	Savings  Money market Brokerage Other		Do you stil have it?

Shanika

Debtor 1

Simone

Saulsberry

Statement of Financial Affairs for Individuals Filing for Bankruptcy

ebtor 1	Shanika	Simone	Saulsberry	Case number (# known)	
	First Name	Middle Name (	.ast Name	Coo Harrison (I Month)	
.Have M ☑ N	you stored prop	perty in a storage un	it or place other than your home	within 1 year before you filed for bankruptcy?	?
	io es. Fill in the de	đại la			
<b>—</b> ,	es. rm m me ge	etans.	Who also has sub-	<b></b>	
			Who else has or had access to	it? Describe the contents	Do you stil have it?
	Name of Storage Fa	rility	Name		☐ No
	name of otologe ( a	unity	Name		🔲 Yes
	Number Street		Number Street		
			CityState ZIP Code		
	City	State ZIP Code	_		
art 9:	Identify i	Property You Hold	l or Control for Someone Els	ua.	
3 Do v		<del></del>		· · · · · · · · · · · · · · · · · · ·	
or he	old in trust for s	omeone	someone else owns / include ar	ny property you borrowed from, are storing for	r,
M V					
□ Y	es. Fill in the de	etails.			
			Where is the property?	Describe the property	Value
					• 4.44
	Owner's Name		_		•
					\$
	Number Street		- Number Street		
			- City State	ZIP Code	
	City	State ZIP Code	3.1.,	Zii Oode	
art 10	Give Deta	alis About Enviror	nmental Information		
or the	numose of Part	10, the following de	Spidion and		
haza	rdous or toxic s	ubstances, wastes,	ate, or local statute or regulation or material into the air, land, soil	concerning pollution, contamination, release , surface water, groundwater, or other mediun	s of
inclu	ding statutes or	regulations control	ling the cleanup of these substa	nces, wastes, or material.	11,
Site r	means any locat	ion, facility, or prop	erty as defined under any enviro	nmental law, whether you now own, operate, o	or
utiliz	e it or used to o	wn, operate, or utiliz	e it, including disposal sites.	The state of the s	
Haza	rdous material r	neans anything an e	nvironmental law defines as a ha	azardous waste, hazardous substance, toxic	
subs	tance, hazardou	ıs material, pollutant	, contaminant, or similar term.	,	
port a	II notices, relea	ses, and proceeding	s that you know about, regardles	ss of when they occurred	
. Has a	ny governmenta	al unit notified you th	nat you may be liable or potentia	lly liable under or in violation of an environme	ntal law?
Ø N	•				
	es. Fill in the de	taile			
	co. i iii iii tile qe	tans.	_		
			Governmental unit	Environmental law, if you know it	Date of notice
N:	me of site		Governmental unit		
			ooverminentat unst		•
No	ımber Street		Number Street	* *	
			<u> </u>		
_			City State ZIP Code	<del>_</del>	
Cit	hv	State 7IP Code			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 10

ebtor 1	Shanika First Name M	Simone	Saulsberry	Case number (# known)	
	r ii st. Haille K	india F9	st reame		
25. Hav	e vou notified any o	governmental unit	of any release of hazardous ma	aterial?	
<b>4</b>		•	ov any volume of mazaraous me		
	Yes. Fill in the deta	ils.			
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit	<del></del>	
	Number Street		Number Street		
			City State ZIP Code	<u> </u>	
	City	State ZIP Code	<del>-</del>		
os Hav	a vou haan a narhe	in any judicial or a	dminiatrativa negacalina unda	r any environmental law? Include settlemen	
<b>Z</b> 1		m any judicial of a	ammadadve proceeding drider	any environmental law? Include settlemen	is and orders.
	Yes. Fill in the deta	ils.			
			Court or agency	Nature of the case	Status of the
	Case title				case
·	Case title		Court Name	***************************************	Pending
					On appeal
			Number Street		☐ Concluded
;	Case number		City State ZIF	Code	
			ony state zir	Code	
Part 1	1: Give Detail	s About Your Bu	siness or Connections to A	Any Business	
7. With	nin 4 years before y	ou filed for bankru	ptcy, did you own a business o	or have any of the following connections to	any business?
į I	A sole proprieto	r or self-employed	in a trade, profession, or other	activity, either full-time or part-time	
	A partner in a pa		pany (LLC) or limited liability p	arthership (LLP)	
			xecutive of a corporation		
[	☐ An owner of at l	east 5% of the voti	ng or equity securities of a corp	poration	
	No. None of the abo				
	res. Check all that a	apply above and fil	I in the details below for each b		
			Describe the nature of the busi	ness Employer Identification Do not include Social Si	
	Business Name		_		•
	Number Street		<u>.</u>	EIN:	
			Name of accountant or bookke	eper Dates business existed	
			-	_	
	City	State ZIP Code	-	From To	
		<b></b>	Describe the nature of the busi	ness Employer Identification	number
	Business Name		•	Do not include Social Se	ecurity number or ITIN.
				EIN:	
	Number Street		. Name of accountant or bookker		
				-F Dates prolitess existed	
				From To	
	City	State ZIP Code	•		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

			Saulsberry	Case number (# known)
	First Name	Middle Name Last	Name	
			Describe the veture of the house	Employer identification number
			Describe the nature of the business	Do not include Social Security number or ITIN.
	Business Name		•	
				EIN:
	Number Street		Name of accountant or bookkeeper	Dates business existed
			Name of accountant of bookkeeper	Dates Dusiness existed
			• !	
				From To
	City	State ZIP Code		<del></del>
	tutions, creditors	e you filed for bankrup s, or other parties.	otcy, did you give a financial stateme	nt to anyone about your business? Include all financial
	lo 'es. Fill in the del	tails below.		
			Date issued	
			Date loaded	
	Name		MM / DD / YYYY	
	Number Street			
	City	State ZIP Code		
	City	State ZIP Code		
	City	State ZIP Code		
	City	State ZIP Code		
12	: Sign Below	,		
l ha ans in c	e Sign Below ve read the answ wers are true and connection with a	vers on this S <i>tatemen</i>	d that making a false statement, con-	nents, and I declare under penalty of perjury that the cealing property, or obtaining money or property by fraud prisonment for up to 20 years, or both.
I ha ans in c	ve read the answ wers are true and onnection with a LS C. §§ 152, 134	vers on this Statemen d correct. I understan bankruptcy case can 41,1519, and 3571.	d that making a false statement, con-	cealing property, or obtaining money or property by fraud
I haransin co	e Sign Below ve read the answ wers are true and connection with a	vers on this Statemen d correct. I understan a bankruptcy case can 41, 1519, and 3571.	d that making a false statement, con n result in fines up to \$250,000, or imp	cealing property, or obtaining money or property by fraud orisonment for up to 20 years, or both.
I haransiin c	ve read the answers are true and onnection with a LSC. §§ 152, 134	vers on this Statemen d correct. I understan bankruptcy case car 41, 1519, and 3571.	d that making a false statement, con n result in fines up to \$250,000, or imp	cealing property, or obtaining money or property by fraud prisonment for up to 20 years, or both.
I haransiin c	ve read the answers are true and onnection with a LSC. §§ 152, 134	vers on this Statemen d correct. I understan bankruptcy case car 41, 1519, and 3571.	d that making a false statement, con n result in fines up to \$250,000, or imp	cealing property, or obtaining money or property by fraud orisonment for up to 20 years, or both.
I has ans in c	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sasignature of Debtor	vers on this Statemen d correct. I understan b bankruptcy case car 11,1519, and 3571.	d that making a false statement, connected in result in fines up to \$250,000, or implement the statement of the statement of Debtor 2	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.
I haansin co	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sasignature of Debtor Date 116/11	vers on this Statemen d correct. I understan b bankruptcy case car 11,1519, and 3571.	d that making a false statement, connected in result in fines up to \$250,000, or implement the statement of the statement of Debtor 2	cealing property, or obtaining money or property by fraud orisonment for up to 20 years, or both.
I had ansin control 18 to the control of the contro	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sa  Signature of Debtor  Date 116/11  you attach addition	vers on this Statemen d correct. I understan b bankruptcy case car 11,1519, and 3571.	d that making a false statement, connected in result in fines up to \$250,000, or implement the statement of the statement of Debtor 2	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.
I ha ans in c 18 l	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sasignature of Debtor Date 116/11	vers on this Statemen d correct. I understan b bankruptcy case car 11,1519, and 3571.	that making a false statement, connected in result in fines up to \$250,000, or implement the statement of the statement of Debtor 2	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.
I ha ans in c 18 l	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sa  Signature of Debtor  Date 116/11  you attach addition	vers on this Statemen d correct. I understan b bankruptcy case car 11,1519, and 3571.	that making a false statement, connected in result in fines up to \$250,000, or implement the statement of the statement of Debtor 2	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.
I had ansi in control 18 to	ve read the answers are true and a l. S.C. §§ 152, 134  Shanika S Sa  Signature of Debtor  Date 116/11  you attach addition  No Yes	vers on this Statemen d correct. I understand bankruptcy case can 41, 1519, and 3571. Sullsberry	that making a false statement, connected in fines up to \$250,000, or implies the statement of Debtor 2  Date	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.
I had ansign control of the control	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sa  Signature of Debtor  Date 116/11  you attach addition  No  Yes	vers on this Statemen d correct. I understand bankruptcy case can 41, 1519, and 3571. Sullsberry	that making a false statement, connected in result in fines up to \$250,000, or implement the statement of the statement of Debtor 2	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.
I 12 I ha ans in contain the c	ve read the answers are true and onnection with a LS.C. §§ 152, 134  Shanika S Sa  Signature of Debtor  Date 116/11  you attach addition  No  Yes	vers on this Statement of correct. I understand is bankruptcy case care 1, 1519, and 3571.  Pullsberry 1  ional pages to Your Statement of the pages to Your Statement of the pages to pay someone who	that making a false statement, connected in fines up to \$250,000, or implies the statement of Debtor 2  Date	cealing property, or obtaining money or property by fraudorisonment for up to 20 years, or both.  viduals Filing for Bankruptcy (Official Form 107)?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	ill in this information to identify your case:  settor 1 Shanika Simone Saulsberry	Check one box Form 122A-1Su	only as directed in this form and in pp:
"	First Name Middle Name Last Name	1. There is no	presumption of abuse.
(S	botor 2  bouse, if filing) First Name Middle Name Last Name  bited States Bankruptcy Court for the: Eastern District of Wisconsin	2. The calcula abuse appl	ation to determine if a presumption of ies will be made under <i>Chapter 7</i> It Calculation (Official Form 122A–2).
	known)		Test does not apply now because of ilitary service but it could apply later.
<b>L</b>		☐ Check if this	s is an amended filing
<u>O</u> 1	fficial Form 122A—1		
C	hapter 7 Statement of Your Current Monti	hly Income	12/15
spa add do i	as complete and accurate as possible. If two married people are filing together, bot ce is needed, attach a separate sheet to this form. Include the line number to which itional pages, write your name and case number (if known). If you believe that you not have primarily consumer debts or because of qualifying military service, compluse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.  Art 1: Calculate Your Current Monthly Income	n the additional info are exempted from	rmation applies. On the top of any a presumption of abuse because you
1.	What is your marital and filing status? Check one only.	· .	
;	Not married. Fill out Column A, lines 2-11.		
	☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2	2-11.	
	☐ Married and your spouse is NOT filing with you. You and your spouse are:		
	Living in the same household and are not legally separated. Fill out both C	olumns A and B, line	s 2-11.
	Living separately or are legally separated. Fill out Column A, lines 2-11; do nunder penalty of perjury that you and your spouse are legally separated under spouse are living apart for reasons that do not include evading the Means Test	nonbankruptcy law th	at applies or that you and your
erine de la faction de la companie d	Fill in the average monthly income that you received from all sources, derived dubankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 19 August 31. If the amount of your monthly income varied during the 6 months, add the infill in the result. Do not include any income amount more than once. For example, if bot income from that property in one column only. If you have nothing to report for any line,	5, the 6-month period come for all 6 months h spouses own the s	would be March 1 through and divide the total by 6. ame rental property, put the
to the sale of the		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 2,022	\$
-	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$	\$
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$	\$
5.	Net income from operating a business, profession, or farm  Debtor 1  Debtor 2		
	Gross receipts (before all deductions) \$\$		
	Ordinary and necessary operating expenses - \$		
1	Net monthly income from a business, profession, or farm \$ \$ Copy here.	<b>*</b> \$	\$
6.	Net income from rental and other real property Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Debtor 1  \$\$  \$		
1000	Net monthly income from rental or other real property.  Copy		¢
7.	Interest, dividends, and royalties	₹ <sup>\$</sup>	\$ \$
		•	

Official Form 122A-1

ebtor 1	First Name Middle Name Last Name	<del></del>	Case number (if known	)	
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	employment compensation		\$	\$	
	not enter the amount if you contend that the amoun ler the Social Security Act. Instead, list it here:				
	For you				
F	For your spouse	··· \$			
	nsion or retirement income. Do not include any an nefit under the Social Security Act.	nount received that was a	\$	\$	
Do as a	ome from all other sources not listed above. Spe not include any benefits received under the Social S a victim of a war crime, a crime against humanity, or orism. If necessary, list other sources on a separate	Security Act or payments received international or domestic	d		
			\$	\$	
			\$	\$	
To	otal amounts from separate pages, if any.		+ \$	+ \$	
	culate your total current monthly income. Add linumn. Then add the total for Column A to the total for		\$2,022	+ \$	= 3,717 Total current monthly income
Part 2	Determine Whether the Means Test Ap	pplies to You			
	culate your current monthly income for the year.	•			A CONTRACTOR OF THE PROPERTY O
12a.	. Copy your total current monthly income from line	11		Copy line 11 here	\$3,717
	Multiply by 12 (the number of months in a year).			g:	x 12
12b.	. The result is your annual income for this part of t	he form.		12b.	\$ <u>44,000</u>
13. <b>Cal</b>	culate the median family income that applies to	you. Follow these steps:			
Fill	in the state in which you live.	WI			
Fill	in the number of people in your household.	3			
To 1	in the median family income for your state and size find a list of applicable median income amounts, go ructions for this form. This list may also be available	online using the link specified in			\$59,305
14. <b>Ho</b> v	w do the lines compare?				
14a.	Line 12b is less than or equal to line 13. On the Go to Part 3.	e top of page 1, check box 1, <i>Th</i>	ere is no presumpt	ion of abuse.	
14b.	Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 122A–2.	ge 1, check box 2, The presump	otion of abuse is de	termined by Form 122A-	-2.
Part 3	Sign Below				
	By eigning here, I declare under penalty of perju	ury that the information on this st	atement and in any	attachments is true and	d correct.
	Shanika Simone Saulsberry	*	·		
	Signature of Debtor 1		nature of Debtor 2		
	Date 021.16.2019				
	Date WYYY DD /YYYY	Da	MM / DD / YYY	<del>Y</del>	
	If you checked line 14a, do NOT fill out or fil	e Form 122A2.			
	If you checked line 14b, fill out Form 122A-2	2 and file it with this form.			

Fill in this	information to identify	your case:		
	Shanika	Sympage	Saulsberry	1
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing	g) First Name	Middle Nams	Last Name	
United State	s Bankruptcy Court for the:	East PINDistrict of	Wisconsin	
Case number	er			
(If known)				Check if this is an amended filing
Official	Farm 100A 1	Cum		
	Form 122A—1	<del></del>	. D	- of Abyer Under 5 707/b\/2\
Stater	nent of Exen	nption from	Presumptio	n of Abuse Under § 707(b)(2) 12/19
-	•	•	•	Income (Official Form 122A-1), if you believe that you are  e. If two married people are filing together, and any of the
exclusions i	n this statement applies	s to only one of you, t	•	complete a separate Form 122A-1 if you believe that this is
required by	11 U.S.C. § 707(b)(2)(C)	•		
Part 1: Id	lantify the Kind of De	bto You Hove		
Part II. Iu	entify the Kind of De	bts fou have		
personal,		ose." Make sure that yo		.C. § 101(8) as "incurred by an individual primarily for a ith the answer you gave at line 16 of the <i>Voluntary Petition for</i>
	to to Form 122A-1; on the			no presumption of abuse, and sign Part 3. Then
☑ Yes. G	Go to Part 2.	· ·		
Dord 21 D		litani Camilaa Duas	lalana Annin ta Van	
Part 2: De	etermine Whether Mi	itary service Prov	sions Apply to You	
2. Are you a	disabled veteran (as de	fined in 38 U.S.C. § 374	<b>1</b> 1(1)) <b>?</b>	
<b>☑</b> No. G	io to line 3.			
	olid you incur debts mostly		ve duty or while you were	performing a homeland defense activity?
	No. Go to line 3.			
		1; on the top of page 1 supplement with the sig		There is no presumption of abuse, and sign Part 3.
3. Are you o	r have you been a Rese	vist or member of the	National Guard?	
	omplete Form 122A-1, Do	• •		
				ity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
	. Complete Form 122A-1.	•	•	
<b>∟</b> Ye	s. Check any one of the f	ollowing categories tha	applies:	
	I was called to active d		1, 2001, for at least	If you checked one of the categories to the left, go to
	90 days and remain on a	·		Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now,</i> and
u	I was called to active d 90 days and was release			sign Part 3. Then submit this supplement with the signed
	which is fewer than 540			Form 122A-1. You are not required to fill out the rest of
Dr	I am performing a hom	-		Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty
_		•	·	or are performing a homeland defense activity, and for
u	I performed a homelan ending on	-	- ·	540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
	before I file this bankrup			If your exclusion period ends before your case is closed,

Official Form 122A-1Supp

Debtor 1	Shanika	Simone	Saulsberry
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filin	g) First Name	Middle Name	Last Name
		Middle Name of the: Eastern District of	
ited States	s Bankruptcy Court to	or the: Eastern District of	VVISCORSIN
ase numbe			

☐ Check if this is an amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Have Secured Claims

identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule Ca
Creditor's name:	Surrender the property.	☐ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
<b>U</b>	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
-	Retain the property and [explain]:	

page 1

Debto	r 1	ı

Shanika	Simone	Saulsberry	Case number (If known)
First Name	Middle Name	Last Name	

Part 2:	List Your	Unexpired	Personal	Property	/ Lease:

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	☐ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	□ No
Description of leased property:	☐ Yes
Lessor's name:	No
Description of leased property:	☐ Yes
Lessor's name:	No
Description of leased property:	☐ Yes
t 8: Sign Below	
inder penalty of perjury, I declare that I have indicated my intentior ersonal property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any
Pravila an Norm *	
Signature of Debtor 1  Signature of Debtor 1	Debtor 2
Date Date	ID / YYYY